PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
05 AUG -1 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P99000044224

1. Corporation Name
JENSEN BEACH PAWN & EXCHANGE, INC

W05-34046

2. Principal Office Address	3. Mailing Office Address
3290 NE INDIAN RIVER DR	SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.
	SAME
City & State	City & State
JENSEN BEACH, FL.	SAME
Zip 34957 Country USA	Zip SAME Country SAME

4. Date Incorporated or Qualified To Do Business in Florida 1999.

5. FEI Number 65-0920835 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
KATHRYN J. BUNTING

Street Address (P.O. Box Number is Not Acceptable)
3290 NE INDIAN RIVER DR.

Suite, Apt. #, Etc.

City JENSEN BEACH | State FL | Zip Code 34957

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent Kathryn J. Bunting REGISTERED AGENT MUST SIGN Date 7/7/05

CR2E081 (01/05)

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	THEODORE STAVRAKOS	1211 A BENTLEY CIRCLE	PORT ST. LUCIE, FL. 34952
V	KATHRYN J. BUNTING	3290 NE INDIAN RIVER DR	JENSEN BEACH, FL. 34957
S	BETTYE ROGERS	1211 A BENTLEY CIRCLE	PORT ST. LUCIE, FL. 34952

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08/03/05--01051--013 **900.00

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

334-7708

SIGNATURE: Kathryn J. Bunting KATHRYN J. BUNTING 7/7/05 772-334-7708
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #