PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS, FORM.

FLORIDA DEPARTMENT OF STATE **CORPORATION** 03-OCT 27 AM 9: 13 Secretary of State REINSTATEMENT DIVISION OF CORPORATIONS SECRETARY OF STATE FALLAHASSEF FLORIDA DOCUMENT # P99000075786 1. Corporation Name JOE'S AUTO WORLD, INC REINSTATEMENT 03 2. Principal Office Address 3. Mailing Office Address 17201 NW 50 CT 17201 NW 50 CT Stiffe, Apt #, etc. Suite, Apt. #, etc. 4. Date incorporated or Qualified To Do Business in Florida 08/25/1999 City & State____ City & State 5. FEI Number Applied For OPA-LOCKA **FLORIDA** OPA-LOCKA **FLORIDA** 65-0943013 Not Applicable Country Ζip Country Zip \$8,75 Additional Fee required CERTIFICATE OF STATUS DESIRED 33055 for a Certificate of Status USA **USA** 33055 7. Name and Address of Current Registered Agent Name OLMEDO, JOSE R JR. 200024169392 10/27/03--01075--020 **1 Street Address (P.O. Box Number is Not Acceptable) **150. 17201 NW 50 CT Suite, Apt. #. Etc. City Zip Code **OPA-LOCKA** 33055 8. 1, being appointed the registered agent of the appre named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S. Registered Agent REGISTERED AGENT MUST SIGN 🦫 Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers and/or Directors Street Address of Each Officer and/or Director Titles City / State / Zip PD OLMEDO, JOSE R JR. 17201 NW 50 CT OPA-LOCKA, FL 33055 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. SIGNATURE: NONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

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JOE'S AUTO WORLD INC. 17201 NW 50 CT OPA-LOCKA FL 33055

10/23/2003

TO: DIVISION OF CORPORATIONS

To Whom It May Concern:

Please be aware that I didn't receive the Uniform Business Report for the year of, 2003 There for I'm asking the Department of Corporation to avoid any late penalty fees. I'm sending the \$150.00 to renew my corporation for 2003

Thank you,

Jose R. Olmedo jr. President