

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

02 FEB 28 AM 10:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P99000105114

1. Corporation Name

Jc Beauty Supplies

2. Principal Office Address

13639 West Dixie Hwy

Suite, Apt. #, etc.

City & State

Miami

Zip

33161

Country

Florida

3. Mailing Office Address

11000 peachtree Dr

Suite, Apt. #, etc.

City & State

Miami

Zip

33161

Country

Florida

4. Date Incorporated or Qualified  
To Do Business in Florida

5. FEI Number

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

JEAN R. JEAN Baptiste

Street Address (P.O. Box Number is Not Acceptable)

11000 peachtree Dr

Suite, Apt. #, Etc.

City

Miami

State

FL

Zip Code

33161

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

JR Baptiste

REGISTERED AGENT MUST SIGN

Date

2-6-02

**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
president	Jean R. Jean Baptiste	11000 peachtree Dr	Miami Fl. 33161
V. pres.	Calvin Cedant	11000 peachtree Dr	Miami Fl. 33161
sec.	Micheline pierre	11000 peachtree Dr	Miami Fl. 33161
treas.	Micheline pierre	11000 peachtree Dr	Miami Fl. 33161

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:

JR Baptiste JEAN R. JEAN Baptiste

1-23-02

Date

305-302-6233

Daytime Phone #

CR2E081 (9/01)

2ab2

To Whom it May Concern I  
Jean B. Jean Baptiste did not received  
The UBR Report for 2001.

Thank you  
Jh. Baptiste 2-26-02