

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 MAY 14 AM 10:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P990000105582**

1. Corporation Name

Law offices of Eric A. Jacobs, P.A.

2. Principal Office Address

12550 Biscayne Blvd.

Suite, Apt. #, etc.

405

City & State

North Miami, FL

Zip

33181

Country

USA

3. Mailing Office Address

12550 Biscayne Blvd.

Suite, Apt. #, etc.

405

City & State

North Miami, FL

Zip

33181

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

12/3/99

5. FEI Number

65-0966065

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

2001-2002 UBR

7. Name and Address of Current Registered Agent

Name

Eric A. Jacobs

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

12550 Biscayne Blvd., Ste

Suite, Apt. #, Etc.

Suite 405

City

North Miami

State

FL

Zip Code

33181

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

REGISTERED AGENT MUST SIGN

Date **5/2/02**

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 |
|----------|--------------------------------------|---|------------------------------|
| P | Eric A. Jacobs | 12550 Bisc. Blvd., Ste 405 | North Miami, FL 33181 |
| | | | 000005979658 |
| | | | -06/25/02--01070--008 |
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/2/02 305-895-1313

Date

Daytime Phone #

CR2E001 (9/01)

282

GRISALES & JACOBS, LLP
Attorneys at Law

Brickell Office

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Tel: (305) 377-4555; Fax: (305) 377-4551
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Oscar Grisales-Racini, Esq.

*Also Admitted to Practice in Colombia, S.A.
*Master in Science and Taxation

Correspondent Offices

* Bogota, Colombia
* Buenos Aires, Argentina

REPLY TO:

North Miami Office

12550 Biscayne Blvd, Suite 405
North Miami, Florida 33181
Tel: (305) 895-1313; Fax: (305) 981-2520
Email: cajacobs@bellsouth.net

Eric A. Jacobs, Esq.

*Also Admitted to U.S. District Court
Southern District
*Master in Business Administration

May 2, 2002

Department of State
Reinstatements
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

Re: Law Offices of Eric A. Jacobs, PA

Dear Sir or Madam:

I have been in contact with your office today with respect to my realization that I had not received UBRs for last year or this year. When I looked on Sunbiz I noticed an address that was quite old; however, from which all mail had been forwarded. I have been advised that since I did not receive the UBR I could remit payment for the UBRs for 2001 and 2002 in the amount of \$300 total. I remit same here and would thank you to reinstate my corporation at your earliest convenience. Should there be anything that you require, do not hesitate to contact me.

Very truly yours,



Eric A. Jacobs