

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

00 JUN -2 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S01790

1. Corporation Name

JASON BROTHERS ENTERPRISES, INC.

2. Principal Office Address

4510 North Ocean Drive

Suite, Apt. #, etc.

City & State

Hollywood, Florida

Zip

33019

Country

Broward

3. Mailing Office Address

4510 North Ocean Drive

Suite, Apt. #, etc.

City & State

Hollywood, Florida

Zip

33019

Country

Broward

REINSTATEMENT

98-100

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

September 24, 1990

5. FEI Number

65-0259937

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

Eric Jason

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

4510 North Ocean Drive

Suite, Apt. #, Etc.

City

Hollywood

State
FL

Zip Code
33019

300003297719-2
-06/20/00--01077--010
***1050.00 ***1050.00

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

Eric Jason
Eric Jason

REGISTERED AGENT MUST SIGN

Date May 2, 2000

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, S, T	D	Eric Jason	4510 North Ocean Drive	Hollywood, Florida 33019

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: *Eric Jason*, as President

May 2, 2000

954-925-4165

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Eric Jason, President