## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## **APPLICATION** FOR REINSTATEMENT



## FLORIDA: DEPARTMENT OF STATE Glenda E. Hood

Secretary of State DIVISION OF CORPORATIONS

S07184 **DOCUMENT #** 

1. Corporation Name

**SIGNATURE:** 

FILED

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SECRETARY OF STATE FALLAMASSEE, FLORIDA

| JAP F                                                              | IX, INC.                                    |                                                     |                                                 |                                                |                    |                                                                                                                                                                     |                   |  |
|--------------------------------------------------------------------|---------------------------------------------|-----------------------------------------------------|-------------------------------------------------|------------------------------------------------|--------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|--|
| Principal Place of Business  705 N NORTHLAKE DR HOLLYWOOD FL 33019 |                                             | Mailing Add                                         | ress                                            |                                                | REIN               | statement <u>oz</u>                                                                                                                                                 | The Control       |  |
|                                                                    |                                             | 705 N NORTHLAKE DR<br>HOLLYWOOD FL 33019            |                                                 |                                                |                    |                                                                                                                                                                     |                   |  |
| If above                                                           | addresses are incorrect in any way, li      | ne through incorrect i                              | information and ente                            | r correction below.                            | 07/25              | 163 gust our 152                                                                                                                                                    | )1 S              |  |
| New Principal Office Address, If Applicable Suite, Apt. #, etc.    |                                             | New Mailing Office Address, fi  Suite, Apt. #, etc. |                                                 | If Applicable                                  |                    | a Incorporated or Qualified Do Business in Florida  10/11/1990  Number Applied For                                                                                  |                   |  |
|                                                                    |                                             |                                                     |                                                 |                                                | 5. FEI Numbe       |                                                                                                                                                                     |                   |  |
| City & State                                                       |                                             | City & State                                        |                                                 | <del></del>                                    |                    | 65-0226910 Not Applic                                                                                                                                               | —                 |  |
| Žip                                                                | Country                                     | Zip                                                 | Coun                                            | try                                            | 6 CERTIFICAT       | E OF STATUS DESIRED  \$8.75 Additional Fee re for a Certificate of St                                                                                               |                   |  |
| 7. Names                                                           | and Street Addresses of Each Office         | r and/or Director (Flo                              | orida nonprofit corpo                           | rations must list at le                        | ast 3 directors)   |                                                                                                                                                                     |                   |  |
| Title(s)                                                           | Name of Officers<br>and/or Directors        |                                                     | Street Address of Each Officer and/or Director  |                                                |                    | City / State / Zip                                                                                                                                                  |                   |  |
| PS                                                                 | DAURIA, JAMES J                             | AMES J 705 N NORTHI                                 |                                                 | KE DR                                          |                    | HOLLYWOOD FL                                                                                                                                                        |                   |  |
| T                                                                  | DAURIA, TARA                                |                                                     | 705 N NORTHLAKE DR                              |                                                |                    | HOLLYWOOD FL                                                                                                                                                        |                   |  |
| VP                                                                 | VP DAURIA, CAROL                            |                                                     | 705 N NORTHLAKE DR                              |                                                |                    | HOLLYWOOD FL                                                                                                                                                        |                   |  |
|                                                                    |                                             |                                                     |                                                 |                                                |                    |                                                                                                                                                                     |                   |  |
|                                                                    |                                             |                                                     |                                                 |                                                |                    |                                                                                                                                                                     | -                 |  |
|                                                                    |                                             |                                                     |                                                 |                                                |                    |                                                                                                                                                                     | $\longrightarrow$ |  |
|                                                                    | 8. Name and Address of Current Registered A |                                                     | jent                                            |                                                | 9. Name and        | Address of New Registered Agent                                                                                                                                     | _                 |  |
|                                                                    | MA (44470 )                                 |                                                     | Name                                            |                                                |                    |                                                                                                                                                                     |                   |  |
| Dauria, James J<br>C/O Jap fix inc                                 |                                             |                                                     | Street Address                                  |                                                | P.O. Box Number    | r is Not Acceptable)                                                                                                                                                | CR2E040 (7/03)    |  |
| 6031 HOLLYWOOD BLVD                                                |                                             | ÷                                                   | Suite, Apt. #, Etc.                             |                                                |                    |                                                                                                                                                                     |                   |  |
| HOLLYWOOD FL 33024                                                 |                                             |                                                     | Ĉity                                            |                                                | <del> </del>       | State Zip Code                                                                                                                                                      | $\dashv$          |  |
| 10. 1, bein                                                        | g appointed the registered agent of th      | e above named corp                                  | oration, am familiar v                          | with and accept the o                          | bligations of Sect | tion 607.0505, F.S. or 617.0505, F.S.                                                                                                                               |                   |  |
| Signature                                                          | ot \$16N                                    | ATURE                                               | F REAL                                          |                                                |                    |                                                                                                                                                                     |                   |  |
| Registered Agent                                                   |                                             | REGISTERED AGENT MUST SIGN                          |                                                 | -> u (1 11 L) -, Lim                           | Date               |                                                                                                                                                                     |                   |  |
| this rei                                                           | nstatement application, the reason for      | dissolution has been<br>the names of individ        | eliminated, the corp<br>luals listed on this fo | orate name satisfies<br>orm do not qualify for | the requirements   | apter 607 or 617, F.S. I further certify that when filing of section 607.0401 or 617.0401, F.S., that all feed der section 119.07(3)(I), F.S. The information indic | s                 |  |



6031 Hollywood Blvd Hollywood, Fl. 33024

Office 954-989-6600 954-989-6677

Hours: 8am-6pm Mon--Sat

November 4, 2003

Florida Department of State **Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

Re: So7184

Dear Sir or Madam:

We received your correspondence of October 23, 2003. There appears to be some confusion interpreting our first letter to you. I thought my second letter would clear up any confusion, but apparently, it did not. However, the fee to reinstate our Corporation continues to rise even while we correspond back and forth.

I did not receive the first renewal. I only became aware of this after receiving the second notice of renewal, but that also required a \$550 amount due.

The initial response was dictated by our accountant in an attempt to assist us.

We have responded to each renewal with our request to abate the penalties and increased charges. We have requested that we be allowed to reinstate our Corporation for the original amount of \$150.00. We receive a response each time for a higher amount! The filing amount is now up to a total of \$750.00. We are a small corporation doing a small local business. To pay fees of this amount would create a hardship on us in such a dismal economy. We have been on time every year since our inception in 1990.

Please accept our apologies and allow us to pay the original amount due of \$150.00. We promise to put the date on our on our calendar in case we don't receive the renewal papers again.

ស្រុក នេះមានជាតិបានសម្រាស់ ខេត្តបាននេះ ប៉ុន្តិប៉ុន្តិលោក ប៉ុន្តែទៅប៉ុន្តិបាន សមាប៉ុន្តិបាន សមាប់ប្រើប្រឹក្សាប

• Page 2 November 4, 2003 Thanking you in advance for your cooperation and time.

Sincerely,

James J. Dauria President