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**APPLICATION FOR REINSTATEMENT**

**FLORIDA DEPARTMENT OF STATE**  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

**FILED**  
97 JAN -7 AM 8:42

Read Instructions on Other Side Before Mailing Form  
Make Check Payable To: **Department of State**

1. Name and Mailing Address of Corporation: **DOCUMENT # S38793**

**JAY EXPORTS, INC.**  
~~116 Phillips Way~~  
~~Sweepstakes City #2106~~  
~~Palm Harbor, FL 34683~~

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
2. If Address in Block 1 is incorrect in any way, enter the correct address below. The NAME of the corporation can be changed only by filing an amendment.

**3477 Fox Hunt Drive**  
Address  
**Palm Harbor, FL 34683**  
City and State  
Zip Code

3. Date Incorporated or Qualified To Do Business in Florida  
**03/06/1991**

4. FEI Number  
**59-3055887**

FEI Number Applied For \$8.75 Additional Fee required for a Certificate of Status  
FEI Number Not Applicable **CERTIFICATE OF STATUS DESIRED**

5. Names and Street Addresses of Each Officer and/or Director

1 Title	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City and State
DPST	Harris, Roger	3477 Fox Hunt Drive	Palm Harbor, FL 34683

**REINSTATEMENT 94-97**

600002049776

**REGISTERED AGENT INFORMATION**

8. Name and Address of New Registered Agent and/or Office

Name  
**Roger Harris**  
Street Address (Do NOT Use P.O. Box Number)  
**3477 Fox Hunt Drive**  
Street Address (Do NOT Use P.O. Box Number)  
City and State  
**Palm Harbor, FL 34683**  
Zip

7. Name and Address of Current Registered Agent

~~Perex, Fernando, III~~  
~~315 East Madison St.~~  
~~Suite 1000~~  
~~Tampa, FL 33602~~

9. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent  RH **Roger Harris**  
REGISTERED AGENT MUST SIGN

Date **1/6/96**

10. If this corporation is a non-profit with I.R.S. 501(c)(3) tax exempt status, check this box  (See other side for additional information)

11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes  No  (See other side for information on intangible tax)

12. 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., and that all fees owed by the corporation have been paid. 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 of Officer or Director  RH **Roger Harris, President**  
Date **1/6/96**

Daytime Phone # **(813) 785-6944**

Typed or printed name of signing officer or director: **Roger Harris, President**

1201 HAYS STREET  
TALLAHASSEE, FL 32301-2607  
904-222-9171  
904-222-0393 FAX

800-342-8086

②



ACCOUNT NO. 072100000032  
REFERENCE *Patricia Pyrite* 5674A

AUTHORIZATION :

COST LIMIT : \$ 1253.75

ORDER DATE : December 30, 1996

ORDER TIME : 3:27 PM

ORDER NO. : 204243-005

CUSTOMER NO: 5674A

CUSTOMER: Jayne Lawton, Legal Assistant  
Kimpton Burke & White  
Suite 100  
28059 U.s. Highway 19, North  
Clearwater, FL 34621

DOMESTIC FILINGS

NAME: JAY EXPORTS, INC.

XX REINSTATEMENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XXX PLAIN STAMPED COPY  
XXX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Andrea C. Mabry  
EXAMINER'S INITIALS \_\_\_\_\_