FLORIDA DEPARTMENT OF STATE APPLICATION								
FOR		Secretary of State			SHER			
REINSTATEMENT		DIVISION OF CORPORATIONS			ALLED Seure Tary Oi Vision of Cori	STA	E	
DOCUMEN 1. Corporation Nati	T # S48297							
JJJ, INC.						06 SEP - 1 PI	1 2:5	53
Principal Place of E	Business	Mailing Address				_		
, s s						3. Date Incorporated or Qualified	3n Dat	of Last Report
						04/25/1991	2003	e of Last Report
2. Principal Place o		2a. Mailing Address				4. FEI Number	<u> </u>	Applied For
21 316 N. Main	Street	26 316 N. Main S	treet			59-3062917		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Additional Required
City & State 23 Gainesville I	TL	City & State 28 Gainesville F	L			6. Election Campaign Financing Trust Fund Contribution		00 May Be ded to Fees
Zip 24 32601	County 25 Alachua	Zip 29 32601	County 30 A		ua	8. This corporation has liability for s. 199.032, Florida Statutes	~ _	c tax under
	ame and Address of Current Reg		50	1		0. Name and Address of New Register		
				81	Name			
],				<u></u>	Sam W. Boon			
			82		(P.O. Box Number is Not Acceptable) st Street Suite E			
				83	ļ			
				84	City Gainesville	FL 85	Zip Co 32601	ie
11. Pursuant to the	provisions of Sections 607. 508.	Florida Statutes, the ab	ove-nan	ned c	orporation submit	ts this statement for the purpose of char	ging its	egistered office or
registered agent, or am familiar with, ar	both, in the Sing of Florida. Sund accept the bigations of Section	ich change was authori n 607.0505, Florida St	zed by that atutes.	he co	rporation's board	of directors. I hereby accept the appoir	tment as	registered agent. I
SIGNATURE	Malu					-in-fact 8/31/2006		
12.	ature, typed of printed name of registered agen OFFICERS AND DIREC		13.	OLE		nture required when reinstating) DATE ONS/CHANGES TO OFFICERS AND		ORS IN 12
TITLE	Director	DELETE	1.1 T	TLE			Char	
NAME	John C. Jennings, Jr. 316 N. Main Street			IAME		90007975	200	יים
STREET ADDRESS CITY-ST-ZIP	Gainesville Fl 32601				ET ADDRESS ST-ZIP	900079721 09/12/060105801	9 4	¥450.00
TITLE		DELETE	2.1 T				Char	103100
NAME		_	2.2 N	IAME	:			
STREET ADDRESS			1		ET ADDRESS			
TITLE	·- <u>-</u>	DELETE	2.40	III Y	ST-ZIP		S Char	an Dadain.
NAME			3.2 N	AME	្រោះ	ENSTATEMEN	Chan	geAddition
STREET ADDRESS]		3.3 S	TREE	ET ADDRESS	SAMO A MAR PRANCES		-(7)
CITY-ST-ZIP			3.4 C	TTY-	ST-ZIP		1/4	,
TITLE			4.1 1	TLE			Char	ge Addition
NAME		DELETE			. 1			
STREET ADDRESS		DELETE	4.2 N	IAME TREE				
STREET ADDRESS CITY-ST-ZIP] DELETE	4.2 N 4.3 S	TREE	ET ADDRESS ST-ZIP			
1		DELETE	4.2 N 4.3 S	TREE	ET ADDRESS ST-ZIP		Char	gc Addition
CITY-ST-ZIP TITLE NAME			4.2 N 4.3 S 4.4 C 5.1 T 5.2 N	TREF STY- STLE SAME	ET ADDRESS ST-ZIP		Char	ge Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS			4.2 N 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S	TREE CITY- CITLE CAME TREE	ET ADDRESS ST-ZIP B ET ADDRESS		Chan	gc Addition
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 14.1 do hereby cert information indicat	ed on this annual report or supple	DELETE DELETE ith this filing does not emental annual report	4.2 N 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C 6.1 T 6.2 N 6.3 S 6.4 C qualify f is true 1	TREE CITY- TTLE TAME TREE TAME TREE TREE TREE TREE TREE TREE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP Et exemption state courate and that m	ed in Section 119.07(3)(i), Florida Statu ny signature shall have the same legal e	Char	ge Addition her certify that the f made under oath:
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 14.1 do hereby cert information indicat	ed on this annual report or supple r of director of the corporation or	DELETE DELETE ith this filing does not emental annual report the receiver or trustee h an address.	4.2 N 4.3 S 4.4 C 5.1 T 5.2 N 5.3 S 5.4 C 6.1 T 6.2 N 6.3 S 6.4 C qualify f is true 4 empower	TREE TTLE TREE TTLE TTLE TTLE TREE TREE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP Et exemption state courate and that m	ny signature shall have the same legal e ort as required by Chapter 607, Florida	Char	ge Addition her certify that the f made under oath:

Florida Department of State Division of Corporation Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: JJJ, INC.

Enclosed are the following:

- 1. Uniform Business Report for the company referenced above.
- 2. \$450.00 check payable to Florida Department of State

We never received the Uniform Business Report for the following year(s) that should have been mailed to us:

2004, 2005, and 2006	 	
, , , , , , , , , , , , , , , , , , , ,	 	

Please waive the late filing fee and treat the company as never being administratively dissolved. Thank you.

By

By Es. Davila As Attorney-in-fact

Name: John C. Jennings, Jr.

Title: President

Date: 8.