

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

APPROVED
AND
FILED

99 JAN -7 PM 3:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S71337**

1. Corporation Name

THE JOINT VENTURE GROUP, INC.

Principal Place of Business

Mailing Address

4609B-3 N.W. 6TH STREET
GAINESVILLE FL 32609

4609B-3 N.W. 6TH STREET
GAINESVILLE FL 32609

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

8890 SW 129 TER

Suite, Apt. #, etc.

3. New Mailing Office Address, If Applicable

PO BOX 560902

Suite, Apt. #, etc.

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33176

Country

USA

Zip

33256

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

08/05/1991

5. FEI Number

59-3127946

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	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 / State / Zip
PD	CHESHIRE, LARRY H	4609B-3 N.W. 6TH STREET	GAINESVILLE FL 32609
VDS	DAVID & SHERYL BIRENBAUM, MARITA	9200 S. DADELAND BLVD. #425	MIAMI FL 33156
PD	DAVID BIRENBAUM	8890 SW 129 TER	MIAMI, FL 33176
SD	ROBERT BIRENBAUM	8890 SW 129 TER	MIAMI, FL 33176
			000002740620--E -01/13/93-01102--006 ***750.00 ***750.00

8. Name and Address of Current Registered Agent

CHESHIRE, LARRY H
4609B-3 N.W. 6TH STREET
GAINESVILLE FL 32609

9. Name and Address of New Registered Agent

Name

DAVID BIRENBAUM

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

8890 SW 129 TER

Suite, Apt. #, Etc.

City

MIAMI

State

FL

Zip Code

33176

10. 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

[Signature]

NOT REQUIRED

REGISTERED AGENT MUST SIGN

Date **1-5-99**

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

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., 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 REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID BIRENBAUM

Date

1-5-99

Daytime Phone #

3052340811

CR2E040 (9/98)