PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

	PLICATION FOR	FLO	RIDA DEPARTME Sandra B. Mo Secretary of S	rtham		proce 1 1 proce proc	
			-	VISION OF CORPORATIONS		FILED	
DOCUMENT # V31655 1. Corporation Name					98 MAY 19 AM 10: 06		
JAMTECH ENTERPRISES INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Principal Place of Business Mailing Address					146	ilminoolei pil	MUA
10501 NW 50TH ST. • 10501 NW 50			W 50TH ST.	NTH ST.			
SUMMISE FL 33351 SUMMISE FL US			SE FL 33351		mrisio	TATEME	NTQ7-98 -
If above addresses are incorrect in any way, line through incorrect information and enter correction below. 2. New Principal Office Address, If Applicable 3. New Mailing Office Address, If Applicable 4. The second of the second o					REINSTATEMENT 97-98 4. Date Incorporated or Qualified		
1887 N.W. 65+ Hor 1387 Sulte, Apt. # etc				etc. To D		ness in Florida	04/28/1992
City & State State			utation, F	ation Fl.		65-0166475 Applied For Not Applicable	
Zip 3 3 3	313 Country S	. А. ^z '33	313 Counti	Y.S. Y	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) Name of Officers Street Address of Each							
DS	and/or Di CHAMBERS, JOY		Officer and/or Director 3 (Do NOT Use Post Office Box N		4 N-LAUDERDALE FL	/ State / Zip	
		2525 N	2525 N.W. 105		SUNICE	el.	
DC	BUCKNOR, DONOVAN	2525 N.	2525 N.W. 105 Ir		Sum Cir P	, E1.	
DT	BUCKNOR, CURTIS	8006 SW 7 CT	8006 SW 7 CT		N LAUDERDALE FL		
-DV	HINDO, DENVER	9006 SW 7 CT			N LAUDERDALE FL	-	
				700002531167-01 3-4			
						****908.75	5 ****98.75
8. Name and Address of Current Registered Agent Name					9. Name and Address of New Registered Agent		
					O. Box Number is Not Acceptable)		
N LAUDERDALE FL 33068 Sulte, Apt. #, Etc.					N.W. 105 laws		
City C							tate Zip Code
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 Date S. 19. 98							
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No							
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 filling 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: DAS 1 DONO DON BUCKUR S.12.98 954-887-8018
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

Date