

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

01 OCT 19 PM 5:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P97000055915**

1. Corporation Name

JEM DESIGNS, INC.

Principal Place of Business

Mailing Address

**8241 S.W. 165TH TERRACE
MIAMI FL 33157**

**8241 S.W. 165TH TERRACE
MIAMI FL 33157**

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



2001 UBR

4. Date Incorporated or Qualified To Do Business in Florida	
06/25/1997	
5. FEI Number	Applied For
65-0763606	Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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)

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
1	2	3	4
PD	LLUY, LORI J	8241 S.W. 165TH TERRACE	MIAMI FL 33157
VD	GOODWIN, RICK	15917 SW 90TH COURT	MIAMI FL 33157

400004685794--8
11/16/01 01000-006
****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

**GOODWIN, RICK
15917 S.W. 90TH COURT
MIAMI FL 33157**

Name **Goodwin, Rick**
Street Address (P.O. Box Number is Not Acceptable)
8241 S.W. 165TH TERRACE
Suite, Apt. #, Etc.
City **Miami** State **FL** Zip Code **33157**

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]

Date **17 OCT 01**

REGISTERED AGENT MUST SIGN

11. 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]

10/17/01

Date

Daytime Phone #

305-225-2034

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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JEM Designs, Inc.

8241 S.W. 165 Terrace
Miami, Florida 33157

Telephone/Fax (305)235-2034

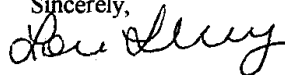
To Whom It May Concern,

Attached is my application and check for \$150.00 for my corporation filing fee. We have not received any previous notices prior to this. Upon examining the enclosed application I now realize why no notices have been received. The current registered agent, Rick Goodwin has not lived at the address you currently have since June 1, 2000 and since the Post Office only forwards mail for 6 months we have not received any forwarded mail since 12/00.

Please correct your records and accept this check as payment in full for our 2001 corporation filing fees.

Thank you for your help in this matter and if you need to contact me feel free to call me at (305)235-2034.

Sincerely,



Lori Lluy, President

FEIN #
05-0763606