

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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APPLICATION FOR REINSTATEMENT

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



FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATION

00 OCT 24 AM 10:41

DOCUMENT # **K81185**

1. Corporation Name
K & H TIME, INC.

Principal Place of Business Mailing Address

2900 W. SAMPLE RD.
 STORE #120
 POMPANO BCH. FL 33067

2900 W. SAMPLE RD.
 STORE #120
 POMPANO BCH. FL 33067



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. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04/14/1989	
City & State		City & State		5. FEI Number	
Zip		Country		65-0116825	
				Applied For	
				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
PSD	CHOE, KIH0	11101 BLUE CORAL DR	BOCA RATON FL

500003455365--6
 11/07/00 01080 013
 ****150.00 ****150.00

81113

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent		
CHOE, KIH0 11101 BLUE CORAL DRIVE BOCA RATON FL 33498		Name		
		Street Address (P.O. Box Number is Not Acceptable)		
		Suite, Apt. #, Etc.		
		City	State	Zip Code
			FL	

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] REGISTERED AGENT MUST SIGN Date: 10/18/2000

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] REGISTERED AGENT MUST SIGN Date: 10/18/2000 Daytime Phone #: (954) 991-4214

CR2E040 (8/00)

K & H Time, Inc.

2900 w. Sample Road
Suite 120,
Pompano Beach, FL 33067
(954) 971-4214

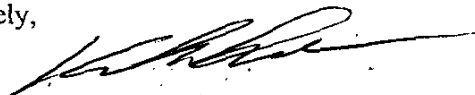
October 18, 2000

Florida Department of State
Katherine Harris, Secretary of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

To Whom It May Concern:

I did not receive my original forms. If you could please accept my check of \$150.00 to renew my 2000 UBR, I would be extremely grateful. In the past I have always sent my UBR in on a timely manner. If you have any questions regarding this matter, please contact me at (954) 971-4214. Thank you in advance for your help in this matter.

Sincerely,


Kiho Choe