

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. *Page 1 of 2*

APPLICATION FOR



FLORIDA DEPARTMENT OF STATE
Jim Smith
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

02 OCT 25 PM 3:22

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # **P01000014074**

1. Corporation Name

J & M SPIRIT WEAR, INC.

Principal Place of Business

Mailing Address

5421 SW 104 CT
 MIAMI FL 33165

5421 SW 104 CT
 MIAMI FL 33165



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

02/07/2001

608 W 27th
 Suite, Apt. #, etc.

same
 Suite, Apt. #, etc.

5. FEI Number

65-1081257

Applied For

Not Applicable

City & State

City & State

Hialeah Fla
 Zip *33010* Country *USA*

Zip Country

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
DP	HERNANDEZ, LOUIS D	5421 SW 104 CT	MIAMI FL 33165

500008594595
 10/25/02--01066--014 **150.00

02432 **TO**

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

HERNANDEZ, LOUIS D
 5421 SW 104 CT
 MIAMI FL 33165

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. or 617.0505, F.S.

Louis D. Hernandez
 Signature of Registered Agent *[Signature]* REGISTERED AGENT MUST SIGN
 Date *10-24-02*

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.

Louis D. Hernandez
 SIGNATURE: *[Signature]* REGISTERED AGENT MUST SIGN
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Date *10-24-02* Daytime Phone # *305-885-8012*

CP2EG40 (8/02)

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J&m spirit wear
608 w 27 st
Hialeah fla 33010

To whom it may concern
We have never received first or second notice of
uniform business report.

President & owner
Louis d hernandez

