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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

JAN -7 AM 8:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDAAPPLICATION
FOR
REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L34425

1. Corporation Name

MODERN UNISEX CORP.

Principal Place of Business

Mailing Address

10550 NW 77 Ct.

Hialeah, Fl., 33016

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

2. New Principal Office Address, if Applicable

2478 W 60 St.

Suite Apt. #, etc.

3. New Mailing Office Address, if Applicable

Suite Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business in Florida

12/1/89

5. FEI Number

☒ Applied For
For AmendmentCity & State
Hialeah, Fl.

City & State

Zip
33014Country
Dade.

Zip

Country

CERTIFICATE OF STATUS DESIRED ☐\$0.25 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 Officer and/or Director	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City / State / Zip
P	Jose Salabarría	5470 W 84 Ave.	Hialeah, Fl, 33016

REINSTATEMENT '91- '99

SCC 1-7-99

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

JOSE SALABARRIA

5470 West 84th Ave.

Hialeah, Fl 33016

Name

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

Suite, Apt. #, etc.

City

State

Zip Code

FL

10. I am appointing 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

* Jose Salabarría

REGISTERED AGENT MUST SIGN

Date

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)(b), F.S. The information furnished on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

* Jose Salabarría

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Page One (Number)

Prepared by: Lourdes Breto 2545 W 72 ST. Hialeah, Fl 33016 (305)558-4947

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850) 922-4004

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

CORPORATION REINSTATEMENT

MODERN UNISEX, CORP.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$1,870.00