

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



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

DOCUMENT # P00000033925

1. Corporation Name

YOUNG'S ACME DRIVE-IN CLEANERS, INC.

Principal Place of Business

254 MASON AVENUE
HOLLY HILL FL 32117

Mailing Address

254 MASON AVENUE
HOLLY HILL FL 32117

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

03/30/2000

5. FEI Number

59-3636986

Applied For

Not Applicable

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director	4 City / State / Zip
Pres	UI TAE Kim	254 Mason Ave	Holly Hill FL 32117

100004669151-4
-11/06/01--01061--009
****750.00 ****750.00

8. Name and Address of Current Registered Agent

KIM, UI TAE
254 MASON AVENUE
HOLLY HILL FL 32117

9. Name and Address of New Registered Agent

Name Kim, UI TAE
Street Address (P.O. Box Number is Not Acceptable)
254 Mason Ave
Suite, Apt. #, Etc.
City Holly Hill
State FL Zip Code 32117

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

UI TAE Kim

Date Oct 15 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:

UI TAE Kim

UI TAE Kim

Date

Oct 15 01

Daytime Phone #

904 253-9710

CRP/040 (8/01)