

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV 24 AM 11:20

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **P01000073830**

1. Corporation Name

FLAGS KING INTERNATIONAL CORPORATION

Principal Place of Business

Mailing Address

20 W 30TH ST
NEW YORK NY 10001

20 W 30TH ST
NEW YORK NY 10001

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

2. New Principal Office Address, If Applicable

2263 NW 20th ST.

3. New Mailing Office Address, If Applicable

2263 NW 20th ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MIAMI FL

City & State

MIAMI FL

Zip

33142

Country

Zip

33142

Country

REINSTATEMENT 03

4. Date Incorporated or Qualified
To Do Business in Florida

07/26/2001

5. FEI Number

65-1124582

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
D	HSIEH, SHU-TZU	42-60 COLDEN STREET #1A	FLUSHING NY 11355
D	HE, ZHONG-YI	20 WEST 30TH STREET, 1ST FLOOR	NEW YORK NY 10001

700024983617
11/24/03--01099--011 **150.00

8. Name and Address of Current Registered Agent

HSIEH, SHU-TZU
2263 N W 20TH STREET
MIAMI FL 33142

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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.

Signature of
Registered Agent

Shu Tzu Hsieh
REGISTERED AGENT MUST SIGN

Date

11/15/03

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:

Shu Tzu Hsieh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SHU TZU HSIEH

Date

Daytime Phone #

11/15/03 (305)609-7582

CR2ED40 (7/03)

Dear Sir:

This is my first time receive this letter from your office, so I have no knowledge that I have to pay the penalty. Enclosed the payment \$ 150 (check # 1551) to payoff the reinstatement fee, annual fee and corporate supplemental fee.

Please ~~contact~~ contact me if you have any questions, my correct address is:

2263 NW 20th ST.

MIAMI FL 33142

Please update your record accordingly.
Thank you!

Sincerely,



SHU TZU HSIEH