

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED

06 OCT -4 AM 10:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P04000 059803**

1. Corporation Name

STEP IT UP SHOES INC.

2. Principal Office Address

3909 RESERVE DR

Suite, Apt. #, etc.

1726

City & State

TALLAHASSEE, FL

Zip

32311

Country

USA

3. Mailing Office Address

3909 RESERVE DR

Suite, Apt. #, etc.

1726

City & State

TALLAHASSEE, FL

Zip

32311

Country

USA

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

4-8-04

5. FEI Number

55-0867789

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

SONNY ARRE

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

3909 RESERVE DR

Suite, Apt. #, Etc.

1726

City

TALLAHASSEE

State

FL

Zip Code

32311

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date **9-29-2006**

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P	SONNY ARRE	3909 RESERVE DR #1726	TALLAHASSEE/FL / 32311
VP	JYNIO PHILIUS	1950 N POINT BLVD #917	TALLAHASSEE/FL / 32308
T	SONNY ARRE	3909 RESERVE DR #1726	TALLAHASSEE/FL / 32311
S	JYNIO PHILIUS	1950 N POINT BLVD #917	TALLAHASSEE/FL / 32308
			300080692283 10/10/06--01067--015 **158.75
			300080692283 10/10/06--01067--015 **150.00

10. 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 contained in Chapter 119, 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:

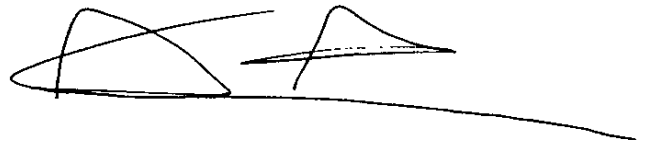
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **9-29-06**

Daytime Phone # **850-519 8338**

I Sonny Arre did not receive
my 2005 Annual Report Notice
for Step It Up Shoes INC.

2/2

A handwritten signature, possibly reading "Sonny Arre", written in black ink. The signature is stylized with a large loop and a horizontal line extending to the right.