

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P06000058869

Entity Name: A-OK NURSERY CORP

FILED  
Nov 09, 2007  
Secretary of State

## Current Principal Place of Business:

4103 ONDICH ROAD  
APOPKA, FL 32712 US

## New Principal Place of Business:

2220 CLASSIC CT  
LONGWOOD, FL 32779 US

## Current Mailing Address:

4103 ONDICH ROAD  
APOPKA, FL 32712 US

## New Mailing Address:

P O BOX 916013  
LONGWOOD, FL 32791 US

FEI Number: 20-4777408

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

## Name and Address of New Registered Agent:

YOO, JUNE  
2220 CLASSIC CT  
LONGWOOD, FL 32779 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JUNE YOO

11/09/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: YOO, JUNE C  
Address: 2220 CLASSIC CT  
City-St-Zip: LONGWOOD, FL 32779 US

Title: D ( ) Delete  
Name: YOO, STANLEY S  
Address: 2220 CLASSIC CT  
City-St-Zip: LONGWOOD, FL 32779 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: YOO, JUNE C  
Address: 2220 CLASSIC CT  
City-St-Zip: LONGWOOD, FL 32779 US

Title: D VP (X) Change ( ) Addition  
Name: YOO, STANLEY S  
Address: 2220 CLASSIC CT  
City-St-Zip: LONGWOOD, FL 32779 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JUNE YOO

PRES

11/09/2007

Electronic Signature of Signing Officer or Director

Date