

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

FILED

DOCUMENT # **P92000004587**

1 Corporation Name

KASH-TEN FASHION, INC.

96 DEC 30 AM 8:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

7845 W. SAMPLE ROAD
STE. #217
CORAL SPRINGS FL 33065
US

Mailing Address

7845 W. SAMPLE ROAD
STE. #217
CORAL SPRINGS FL 33065
US

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

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

REINSTATEMENT

mw813-97

1996

Suite, Apt. #, etc.

4725 NW 103 Ave.

Suite, Apt. #, etc.

4. Date Incorporated or Qualified
To Do Business In Florida

11/10/1992

City & State

Sunrise, Florida

City & State

5. FEI Number

65-0429068

Applied For

Not Applicable

Zip

33351

Country

Broward

Zip

Country

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 (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
DP	LEV, ALYSON-J	4133 N.W. 88TH AVENUE, #201	CORAL SPRINGS FL
DVST	LESSER, ALYSON J.	4133 NORTHWEST 88TH AVENUE, #201	CORAL SPRINGS FL
DP	SHAY M. LEV	4133 NW 88 Ave #201	Coral Springs, Fl. 33065
DVST	ALYSON J. LESSER - LEV	4133 NW 88 Ave #201	Coral Springs, Fl. 33065
			200002051862--5 -01/09/97--01015--003 ***\$375.00 ***\$375.00

8. Name and Address of Current Registered Agent

LEV, SHAY M.
4133 N.W. 88TH AVE., #201
CORAL SPRINGS FL 33065

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

Zip Code

FL

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

Shay Lev
REGISTERED AGENT MUST SIGN

Date 12-23-96

11. Does this corporation pay any intangible tax to the
Dept. of Revenue under S. 199.032, Florida Statutes. 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)(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:

Alyson Lesser Lev
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-23-96 (954) 572-1198
Date Daytime Phone #