

13 / 02

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED  
04 APR 19 AM 11:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

<b>CORPORATION REINSTATEMENT</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # P93000003204</b>			
<b>1. Corporation Name</b>  <b>KENWIN CORPORATION</b>			
<b>2. Principal Office Address</b> <b>5181 SW 20 STREET</b>		<b>3. Mailing Office Address</b> <b>5181 SW 20 STREET</b>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State <b>PLANTATION, FLORIDA</b>		City & State <b>PLANTATION, FLORIDA</b>	
Zip <b>33317</b>	Country	Zip <b>33317</b>	Country

REINSTATEMENT 02-04

<b>4. Date Incorporated or Qualified To Do Business in Florida</b> <b>JANUARY 14, 1993</b>	
<b>5. FEI Number</b> <b>65-0378674</b>	Applied For <input type="checkbox"/> Not Applicable
<b>6. CERTIFICATE OF STATUS DESIRED</b> <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	

<b>7. Name and Address of Current Registered Agent</b>			
Name <b>CHIN, HUGH</b>			
Street Address (P.O. Box Number is Not Acceptable) <b>5181 SOUTHWEST 20TH STREET</b>			
Suite, Apt. #, Etc.			
City <b>PLANTATION</b>	State <b>FL</b>	Zip Code <b>33317</b>	

300033094053  
04/19/04--01068--016 \*\*450.00

<b>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.</b>			
Signature of Registered Agent <i>Hugh Chin</i>		Date <b>APRIL 13, 2004</b>	
REGISTERED AGENT MUST SIGN			
<b>9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)</b>			
Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
<b>D</b>	<b>CHIN, HUGH</b>	<b>5181 SOUTHWEST 20TH STREET</b>	<b>PLANTATION, FLORIDA 33317</b>
<b>D</b>	<b>CHIN, WINNIFRED</b>	<b>5181 SW 20TH STREET</b>	<b>PLANTATION, FLORIDA 33317</b>
<b>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 under section 119.07(3)(f), 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.</b>			
SIGNATURE: <i>Hugh Chin</i>		<b>HUGH CHIN</b>	<b>APRIL 13, 2004</b>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone # <b>954 792 7951</b>

CR2001 (01/04)

TR

5181 S.W. 20 STREET  
PLANTATION, FLORIDA 33317  
U.S.A.

Phone: (954) 792-7951  
Fax: (954) 792-9067  
Email: [info@kenwincorporation.com](mailto:info@kenwincorporation.com)

**To Whom It May Concern:**

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee  
Florida 32399

**Re: Corporate Re-instatement**

We are concerned when we discovered that the corporate fees for our company were not paid for the years 2002, 2003 and 2004. The reason for this could be that we relocated in 2001, and we did not receive the UBR form for 2002 at our new address.

Attached, please find our application for re-instatement, with hope that penalties will be waived. Enclosed is our check for \$450.00, representing fess for the years 2002, 2003 and 2004.

Thanking you in advance for your kind attention.  
Yours truly,

Hege Chen

**Hugh Chin**  
**President**

1. The first step is to identify the variables involved in the problem. In this case, the variables are the number of hours worked per week ( $x$ ) and the total income per week ( $y$ ).