

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
02 JAN 18 AM 11:13

DOCUMENT #

P95000083109

1. Corporation Name

Zoot Suits Inc.

2. Principal Office Address

11180 W. Oakland Park Blvd.

Suite, Apt. #, etc.

City & State

SUNRISE FL

Zip

33351

Country

U.S.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified  
To Do Business in Florida

1997

5. FEI Number

65 0626309

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

DAVID L FREIMAN

300004797463-6

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

1551 NW 125 AVE #307

-01/25/02--01029--001

\*\*\*\*300.00 \*\*\*\*300.00

Suite, Apt. #, Etc.

City

SUNRISE

State

FL

Zip Code

33323

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

*[Signature]*

Date 1/1/02

REGISTERED AGENT MUST SIGN

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 DAVID L FREIMAN

1551 NW 125 AVE.

SUNRISE FL 33323

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)(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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/1/02

954 749 0660

CR2E081 (9/01)

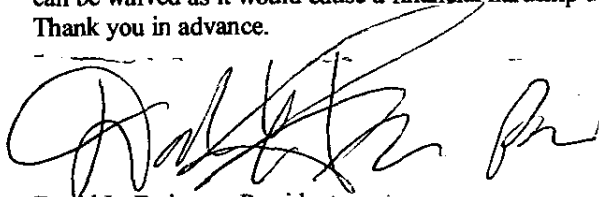
1/01/2001

To the State,

Enclosed find a renewal/reinstatement form for our company. Please understand that for the past five years we have always received, filled out, and renewed our corporation papers properly. Recently our attorney received notice that the state canceled our corporation due to non-renewal. This is a mistake. For some reason our form never got to us, or perhaps was not sent to us properly. All of our corporate papers are in order including our annual stockholder's meeting and the minutes that go along with it. We would like to have Zoot Suits Inc. reinstated and a check for \$300.00 is enclosed along with this letter and the application.

Due to the oversight that may have occurred from the annual mailing we do hope that any type of penalties can be waived as it would cause a financial hardship during these difficult business times.

Thank you in advance.

A handwritten signature in black ink, appearing to read 'David L. Freiman', is written over a horizontal line.

David L. Freiman President  
Eagle Cleaners  
Zoot Suits Inc.  
11180 W. Oakland Park Blvd.  
Sunrise, FL. 33351  
954-749-0660