PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
01 DEC 20 PM 3:37

DOCUMENT # P96000077645

1. Corporation Name

HOLLYWOOD FASHION MALL, INC.

900004745199--3
-12/31/01--01071--003
****600.00 ****600.00

REINSTATEMENT 01
05-11-01 90009 042 $750.00

Principal Place of Business	Mailing Address
5800 HOLLYWOOD BLVD HOLLYWOOD FL 33021 US	5800 HOLLYWOOD BLVD HOLLYWOOD FL 33021 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
Suite, Apt. #, etc.	Suite, Apt. #, etc. c/o BHCR CO,
City & State	City & State 600 BOND ST. BRIDGEPORT CT.
Zip / Country	Zip 06610 / Country USA

4. Date Incorporated or Qualified To Do Business in Florida: 09/18/1996

5. FEI Number: 65-0707713 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee Required for a Certified Copy 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	4 City / State / Zip
D	LOREN, NORMA	49 VENCELA DR	NEW ROCHELLE NY 10804
D	NEWMAN, WILLIAM	50 LARCH HILL RD	LAWRENCE NY 11559
D	RABENSTEIN, NORMAN	142 SUTTON PLACE S.	LAWRENCE NY 11559
D	BLASS, RACHEL	1435 56TH STREET	BROOKLYN NY 11219
D	CHAIM STERN	70-50 136 ST,	FLUSHING N.Y 11367
D	BRAUSTEIN, BARRY	1849 58 STREET	BROOKLYN NY 11204

8. Name and Address of Current Registered Agent

United Corporate Services, Inc.
9200 South Dadeland Blvd.
Suite 508
Miami, FL 33156-

9. Name and Address of New Registered Agent

Name: Alan Koslow, Esq.
Street Address (P.O. Box Number is Not Acceptable): 3111 Stirling Road
Suite, Apt. #, Etc.:
City: Fort Lauderdale State: FL Zip Code: 33312

CR2E043 (8/01)

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: _____ Date: 12/18/01

REGISTERED AGENT MUST SIGN

11. 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: _____ 12/17/01 2033846427

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CHAIM STERN