

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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APPLICATION
FOR
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State
DIVISION OF CORPORATIONS

FILED

03 NOV -6 AM 10:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P96000079416**

1. Corporation Name

HAPPY KIDS CHILDRENWEAR, INC.

Principal Place of Business

2266 NW 20TH ST
MIAMI FL 33142
US

Mailing Address

2266 NW 20TH ST
MIAMI FL 33142
US

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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

09/25/1996

5. FEI Number

65-0700582

Applied For

Not Applicable

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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
DP	HERNANDEZ, LUIS F	10112 SW 2ND ST	MIAMI FL

REINSTATEMENT

8. Name and Address of Current Registered Agent

TORRES, JOSE G
8502 NW 198TH TERR
HIALEAH FL 33015

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State

FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE

REGISTERED AGENT MUST SIGN

Date

10-13-2003

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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

10/13/2003 (305) 633-2121

CR2E040 (7/03)

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October 13, 2003

Divisions of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Reference: Happy Kids Children Wear, Inc.
2266 NW 20 St
Miami, FL 33142
EIN 65-0700582
Doc. # P96000079416

~~This is to respond to your notice of administrative dissolution or revocation received on~~
Friday 10, 2003. We sent our renewal before May 1st, 2003, but, you have not cashed the
check. We did not receive any further notification regarding the pending check or to
remit another replacement check..

I am sending a replacement check to cover for the 2003 Uniform Business Report. I am
also requesting that you waive the reinstatement fee since I did not receive any Business
Report Notice.

Thanks for your attention to this matter.

Sincerely,



Luis Felipe Hernandez, President