

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

98 MAR 19 PM 3:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

1. Corporation Name

P96000095672

Jacksonville Indoor Flea Market, Inc.

Principal Place of Business

800 Lem Turner Rd.
Jacksonville FL 32208

Mailing Address

1310 W. Colonial Dr. Ste 18
Orlando FL 32804

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.

City & State

City & State

Zip

Country

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

☒ 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 (Do NOT Use Post Office Box Numbers) 3	City / State / Zip 4
President	Young K. Kim	8618 Vesta Terrace	Orlando, FL 32825
V. President	Chom Ja Kim	8618 Vesta Terrace	Orlando, FL 32825

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3/19/98

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

Jong H. Lee

401 S. 60th Ave #260
Hollywood, FL 33023

Name

Young S. Hu

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

1310 W. Colonial Dr. Suite 18

Suite, Apt. #, Etc.

Suite 18

City

Orlando

State

FL

Zip Code

32804

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

Young S. Hu

REGISTERED AGENT MUST SIGN

Date 3/10/98

11. This corporation owes or has paid the current year
Intangible Personal Property tax due June 30.

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:

Young K. Kim

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/10/98

Date

(407) 648-0799

Daytime Phone #

CR2040 (1/98)