

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

1997 DEC 22 11:11:18

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000002015

1. Corporation Name
SOUTHERN BUTTONS OF FLORIDA, INC.

Principal Place of Business
2601 S. BAYSHORE DRIVE, SUITE 600
MIAMI FL 33133

Mailing Address
2601 S. BAYSHORE DRIVE, SUITE 600
MIAMI FL 33133



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

4. Date Incorporated or Qualified To Do Business In Florida

12/30/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For
 Not Applicable

City & State

City & State

Applied

Zip

Country

Zip

Country

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)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
D/PRES	PASTORE, RALPH	50 BROAD STREET Suite 537	NEW YORK NY 10004

REINSTATEMENT ^{also} 12/22/97

8. Name and Address of Current Registered Agent

HKE&F REGISTERED AGENT CORP.
2601 S. BAYSHORE DRIVE, SUITE 600
MIAMI FL 33133

9. Name and Address of New Registered Agent

Name 2000002381832-9
Street Address (P.O. Box Number is Not Acceptable) 12/24/97-01038-022
Suite, Apt. #, Etc. ***750.00 ***750.00
City State Zip Code
FL

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 Richard H. Krinzman, Sec., HKE&F Registered Agent Corp. Date 12/19/97

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (none due) (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)(l), 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: Ralph Pastore, President Date 12/10/97 (212)344-5900 Daytime Phone #

CR2EPC0 (9/97)