

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

10f2

APPLICATION FOR REINSTATEMENT

FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000002193

1. Corporation Name

S & D UNION CORP.

Principal Place of Business Mailing Address

13083 NW 11 CT. 13083 NW 11 CT.
SUNRISE FL 33323 SUNRISE FL 33323

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01/02/1997	
City & State		City & State		5. FEI Number	
Zip		Country		65-0725931	
				Applied For	
				Not Applicable	
				6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$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	4. City / State / Zip
D	WONG, STANLEY	13083 NW 11 CT.	SUNRISE FL 33323

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent
WONG, STANLEY 13083 NW 11 CT. SUNRISE FL 33323	Name
	Street Address (P.O. Box Number is Not Acceptable)
	Suite, Apt. #, Etc.
	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 Stanley Wong Date 10/16/00

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: Stanley Wong Date 10/16/00 Daytime Phone # (954) 748-5971

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2ED040 (8/00)

2052

State of Florida
Department of State

Dear Sir/Madam -

For some unknown reason we haven't
receive the corporate renewal notice
until now that we receive the revocation
letter. Please accept our apologize
for being so late.

Yours sincere

Stanley Wong

S. E. D. UNION CORP.

10/16/00