

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000079820

1. Corporation Name

"A" FASHIONS, INC.

Principal Place of Business

A FASHION INC.
2811 N.W. 5TH AVE.
MIAMI FL 33127

Mailing Address

521 E. MT. VERNON DR.
PLANTATION FL 33325

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

09/15/1997

5. FEI Number

65-0788621

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)

2

Name of Officers
and/or Directors

3

Street Address of Each
Officer and/or Director

4

City / State / Zip

P

GILMORE, HYE SUK

521 E. MT. VERNON DR

PLANTATION FL 33325

8. Name and Address of Current Registered Agent

GILMORE, HYE SUK
521 E. MT. VERNON DR.
PLANTATION FL 33325

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

REGISTERED AGENT MUST SIGN

Gilmore

Date 11/7/02

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (8/02)

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A FASHION INC.
2811 N. W. 5 AVENUE
MIAMI, FL 33127
TEL. (305) 571-7141 FAX (305) 571-9556

November 7, 2002

Florida Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: 2002 Uniform Business Report

Dear Sirs:

Enclosed is an executed Uniform Business Report with a check for \$150.00.

I have NEVER received the original UBR in 2002. I always take care of governmental reports and make payments very promptly. But this report was never received this year. Please note that I filed and paid the UBR for 2001 year in January, 2001.

Please remove the penalty. Thank you for your kind and prompt attention.

Sincerely,


Hye Sook Gilmore, President

Enc.