

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
 Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

99 DEC 28 PM 2:37

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P98000013200

1. Corporation Name

G.S.Y. TRADING, INC.

Principal Place of Business

Mailing Address

~~2727 NW 5TH AVENUE
 SUITE 101
 MIAMI FL 33127~~

~~2727 NW 5TH AVENUE
 SUITE A
 MIAMI FL 33127~~

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

2. New Principal Office Address, If Applicable

2142 NW 20th St.

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami FL

City & State

Zip

33142

Country

had e

Zip

Country

REINSTATEMENT

99

4. Date Incorporated or Qualified To Do Business in Florida

02/10/1998

5. FEI Number

65-0825350

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED

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
P	YOON, GI-SEUNG	19000 N.W. 65TH COURT	MIAMI FL 33015
b/p/s		15800 BULL RUN Rd 360-F	Miami Lakes, FL 33014

800003088558--8
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 ****750.00 ****750.00

8. Name and Address of Current Registered Agent

~~CHO, SANDY H~~
 2750 NW 3RD AVENUE #9
 MIAMI FL 33127

9. Name and Address of New Registered Agent

Name: Yoon, Gi-Seung
 Street Address (P.O. Box Number is Not Acceptable): 2142 NW 20th St.
 Suite, Apt. #, Etc.: # 7
 City: Miami
 State: FL
 Zip Code: 33142

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

Gi-Seung Yoon

SIGNATURE REQUIRED
 REGISTERED AGENT MUST SIGN

Date 12-23-99

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:

Gi-Seung Yoon
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

12-23-99

Daytime Phone #

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