

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED
01 MAR -5 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P98000017395

1. Corporation Name

YOUNG SHOES, INC.

2. Principal Office Address

BLVD
3161 W. OAKLAND PARK

3. Mailing Office Address

2750 NW 3RD AVE

Suite, Apt. #, etc.

970

Suite, Apt. #, etc.

19

City & State

FT. LAUDERDALE, FL

City & State

MIAMI, FL

Zip

33311

Country

BROWARD

Zip

33127

Country

DADE

REINSTATEMENT

**4. Date Incorporated or Qualified
To Do Business in Florida**

5. FEI Number

65-0814376

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Sung Pill Kim

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

22375 SW 66th Ave.

Suite, Apt. #, Etc.

Apt. # 1407

City

Boca Raton

State
FL

Zip Code

33428

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

Sung Pill Kim

REGISTERED AGENT MUST SIGN

Date 03-02-01

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P/S/D	Kim, Sung Pill	22375 SW 66th Ave # 1407	Boca Raton, FL 33428

LS

10. 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:

Sung Pill Kim

Sung Pill Kim

03-02-01

(305) 576-4434

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #