

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

FILED



**CORPORATION
REINSTATEMENT**

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

DOCUMENT#-P99000055467

1. Corporation Name

A & M Shoe Warehouse, Inc.

2. Principal Office Address 4607 14th Street West Suite, Apt. #, etc.		3. Mailing Office Address 130 S. University Dr. Suite, Apt. #, etc. Suite D	
City & State Bradenton, Florida		City & State Plantation, Florida	
Zip 34207	Country USA	Zip 33324	Country USA
4. Date Incorporated or Qualified To Do Business in Florida 6/18/99			
5. FEI Number 65-0927989			
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status			

7. Name and Address of Current Registered Agent	
Name	muhammad D Husein
Street Address (P.O. Box Number is Not Acceptable)	4607 14th Street West
Suite, Apt. #, Etc.	
City	Bradenton
State	FL
Zip Code	34207

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**

Date

REGISTERED AGENT MUST SIGN

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

Name 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
PRST	Husein, Mohammad D	4607 14th Street West	Bradenton, FL 34207
D	Husein, Mohammad D	4607 14th Street West	Bradenton, FL 34207

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: Mahmud P. Hussain
SIGNATURE AND TYPED OR PRINTED NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mohammad D. Husein, 10/30/02

Date

~~5000~~
Daytime Phone:

**A & M SHOE WAREHOUSE
4607 14TH STREET, WEST
BRADENTON, FL 34207**

October 30, 2002

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

Re: A & M SHOE WAREHOUSE, INC.

~~F:E:I:N: 65-0927989~~

DOCUMENT NUMBER - P99000055467

Dear Sir or Madam:

I am the President of A & M Shoe Warehouse, Inc. I recently became aware that my corporation lapsed with the state. Please be advised that the necessary renewal documents were never received by my office. The mailing address currently listed with the state is not the correct address. I have enclosed a reinstatement form to update my company along with a check in the amount of \$ 150.00 for the renewal fee. Please make a note of the correct mailing address and adjust your records accordingly.

Based on the foregoing, I respectfully request that you please remove the late filing penalties and accept my reinstatement form. Your help and understanding in this matter would be greatly appreciated.

Sincerely,

Mohammad D Husien - *Mohammed D. Husien*
President

Enclosures