

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 3:39

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # P99000102143

1. Corporation Name

Galaxy Walk Shoes, Inc.

2. Principal Office Address

3580 West 18 Ave

Suite, Apt. #, etc.

#110

City & State

Hialeath, Fl.

Zip

33012

Country

U.S.A.

3. Mailing Office Address

3580 West 18 Ave

Suite, Apt. #, etc.

#110

City & State

Hialeath, Fl

Zip

33012

Country

U.S.A.

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

Nov 22 1999

5. FEI Number

65-0961669

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

Rigoberto Herrera

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

3580 West 18 Ave

900003828259-7

-03/03/01--01066--023

Suite, Apt. #: Etc.

#110

****908.75 ****908.75

City

Hialeath

State

FL

Zip Code

33012

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

Rigoberto Herrera

REGISTERED AGENT MUST SIGN

Date 2/28/01

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	Rigoberto Herrera	3580 West 18 Ave #110	Hialeath, Fl 33012
V	Alicia Martinez	3580 West 18 Ave #110	Hialeath, Fl 33012

REINSTATEMENT

2000 01

DR. MILLIGAN

MAR 06 2001

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:

Rigoberto Herrera

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/28/01

Date

305-824-8505

Daytime Phone #

CR2E081 (9/00)