

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 JUL 24 AM 9:13

DOCUMENT # *P 99000110868*

1. Corporation Name

SAM YONG INTERNATIONAL, INC

2. Principal Office Address

P.O. BOX 987

Suite, Apt. #, etc.

3. Mailing Office Address

4444 LAWTON

Suite, Apt. #, etc.

City & State

ST. PETERSBURG, FL

Zip

33701

Country

USA

City & State

DETROIT, MI

Zip

48208

Country

USA

REINSTATEMENT

03-06

CR2E081 (12/05)

4. Date Incorporated or Qualified
To Do Business in Florida

12/27/1999

5. FEI Number

31-185420

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

ROBERT W. HAYAMAKI CAA

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

695 CENTRAL AVE SE

Suite, Apt. #, Etc.

STE 200A

City

ST. PETERSBURG

State

FL

Zip Code

33701

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

[Signature]
REGISTERED AGENT MUST SIGN

Date *7/2/06*

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
<i>Pres</i>	<i>SAMSUK KIM</i>	<i>P.O. BOX 987</i>	<i>ST. PETERSBURG, FL, 33701</i>
<i>D</i>	<i>DAVID J. WOOD</i>	<i>32000 GLASS RIVER RD 290</i>	<i>FARMINGTON, MI 48335</i>
<i>D</i>	<i>DENNIS KAPP</i>	<i>4444 LAWTON</i>	<i>DETROIT, MI, 48208</i>
<i>D</i>	<i>ROBERT HAYAMAKI</i>	<i>4444 LAWTON</i>	<i>DETROIT, MI, 48208</i>

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 contained in Chapter 119, 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]
ROBERT HAYAMAKI CAA
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/2/06
Date

313
895-0700
Daytime Phone #