

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



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

FILED

01 APR 17 AM 9:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P9800000771062

1. Corporation Name
STERLING FLORAL CONTAINER CO.

2. Principal Office Address
33376 ROWNTREE DR.

Suite, Apt. #, etc.

City & State
DADE CITY FL

Zip Country
33525 USA

3. Mailing Office Address
33376 ROWNTREE DR.

Suite, Apt. #, etc.

City & State
DADE CITY FL

Zip Country
33525 USA

REINSTATEMENT 09-01

4. Date Incorporated or Qualified To Do Business in Florida **7-27-1998** **SP**

5. FEI Number **59-3528943**
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
GREGG A. LYNCH

Street Address (P.O. Box Number is Not Acceptable)
14144 SIXTH ST.

Suite, Apt. #, Etc.

600004077806-4
-04/25/01 --01080--009
*****1050.00 ***1050.00**

City
DADE CITY

State
FL

Zip Code
33525

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 *Gregg Lynch*

REGISTERED AGENT MUST SIGN

Date 4-12-01

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	HONG TU	11051 US HWY 98	DADE CITY FL 33525
VP	JOHN STERLING	33376 ROWNTREE DR	DADE CITY FL 33525
D	XIAO FU DAI	11051 US HWY 98	DADE CITY FL 33525

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: *John R. Sterling* John R. Sterling
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/13/02 352-583-2393
Date Daytime Phone #

CR2E081 (9/99)