

**FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

Reinstatement

FILED

1/2

DOCUMENT # 577617

1. Entity Name

Lucy HO'S Bamboo Garden Inc.



06 JUN 12 PM 2:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1700 Halstead Blvd

3. Mailing Address

Same

REINSTATEMENT

04-06

CR2E034B (8/05)

City & State

Tallahassee

City & State

4. FEI Number

59-183-4779

Applied For

Not Applicable

Zip

FL 32309

Country

Leon

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Shawn Lee

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

2801 Chancellorsville Rd. #327

City Tallahassee

FL

Zip Code

32312

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Shawn Lee
Signature typed or printed name of registered agent and title if applicable.

Shawn Lee

6/12/06

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended AR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	HO, Lucy 402 Vinnege Ride PD Tallahassee FL 32303
TITLE NAME STREET ADDRESS CITY-ST-ZIP	HO, John. 402 Vinnege Ride SD Tallahassee FL 32303
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Chiu, KATHARIN 3224 Robinhood Rd. VD Tallahassee FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Masatoshi Nagashima TD 4708 Stoney Trace Tallahassee FL 32309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Shawn Lee 2801 Chancellorsville Rd. Director. #327 Tallahassee FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	500077384095 07/12/06--01017--001 **450.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Shawn Lee
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/12/06

Date

850-2126610

Daytime Phone #

To: State of Department of Corporation

2/2

We had not Received any notice From 2004
2005
from State for. Renewing Our Corporation
record.

Thank you so much:

Lucy Ho's Bamboo Garden Inc.

Shan Lee 6/12/06.