

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

FILED
 98 JUL 20 AM 9:40
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # F96000001313

1. Corporation Name
American Food Courts, Inc.

Principal Place of Business	Mailing Address
Lake Buena Vista Factory Stores 15771 S. Apopka Vineland Rd. Orlando, Florida 32821	11726 San Vicente Blvd. Suite 280 Los Angeles, CA 90049

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable		3. New Mailing Office Address, If Applicable		4. Date Incorporated or Qualified To Do Business in Florida	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3/14/96	
City & State		City & State		5. FEI Number	
Zip		Zip		88-0347692	
Country		Country		Applied For	
				Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$8.75 Additional Fee required for a Certificate of Status	

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)			
1. Title(s)	2. Name of Officers and/or Directors	3. Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4. City and State
Pres.	Mr. Daniel Lee	11726 San Vicente Blvd. Suite 280	Los Angeles, California 90049
Secretary	Mr. Daniel Lee	Same as Above	Same as Above
Treasurer	Mr. Daniel Lee	Same as Above	Same as Above
Chairman	Mr. Tommy D.M. Lee	11726 San Vicente Blvd. Suite 280	Los Angeles, California 90049

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent	
Nationscorp Registered Agents, Inc. 526 E. Park Avenue Tallahassee, Florida 32301		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		Suite, Apt. #, Etc.	
		City	

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Ed Aland REGISTERED AGENT MUST SIGN Date: 6/29/98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)

12. 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: Daniel Lee Daniel Lee, President Date: 6/12/98 (310) 820-1195
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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