

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 MAY 25 PM 1:00

DOCUMENT # **H00981**

1. Corporation Name

**Dragon House Investment &
Development, INC H00981**

2. Principal Office Address

55 SW 30th Ave

Suite, Apt. #, etc.

City & State

Ocala FL

Zip

34474

Country

USA

3. Mailing Office Address

55 SW 30th Ave

Suite, Apt. #, etc.

City & State

Ocala FL

Zip

34474

Country

USA

REINSTATEMENT

4. Date Incorporated or Qualified
To Do Business in Florida

April 27 1984

5. FEI Number

592 429 655

☒ 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

FRANCIS KAO

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

55 SW 30th Ave

Suite, Apt. #, Etc.

City

Ocala

State

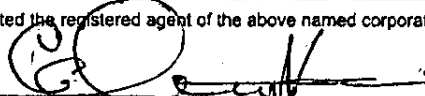
FL

Zip Code

34474

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



REGISTERED AGENT MUST SIGN

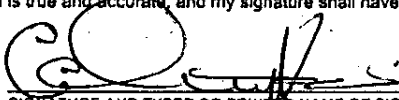
Date **May 24 2001**

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/T	Francis Kao	55 SW 30th Ave	Ocala FL 34474

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:



SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Francis Kao May 24, 2001

Daytime Phone #

416-567-1221

CR2E081 (Rev. 9/95)