


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT



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

FILED
 01 AUG -8 PM 2:46
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # J08669
 1. Corporation Name
 LEE & CHAN CORP.

800004547468--3
 -08/21/01--01072--006
 ****900.00 ****900.00

2. Principal Office Address 1000 NE 172 TERRACE Suite, Apt. #, etc.		3. Mailing Office Address 1000 NE 172 TERRACE Suite, Apt. #, etc.	
City & State NORTH MIAMI BEACH, FL Zip 33162 Country USA		City & State NORTH MIAMI BEACH, FL Zip 33162 Country USA	

4. Date Incorporated or Qualified To Do Business in Florida: 4/10/1986

5. FEI Number: 592668721
 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: LEE, KWAI SANG
 Street Address (P.O. Box Number is Not Acceptable): 1000 NE 172 TERRACE
 Suite, Apt. #, Etc.:
 City: NORTH MIAMI BEACH State: FL Zip Code: 33162

REINSTATEMENT 00-01

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: *Kwai Sang Lee* Date: *July 30/2001*
 REGISTERED AGENT MUST SIGN

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
PD	LEE, KWAI SANG	1000 NE 172 TERRACE	MIAMI, FL 33162
STD	LEE, SUEN CHAN	1000 NE 172 TERRACE	MIAMI, FL 33162

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: *Kwai Sang Lee* Date: *July 30/2001*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CP-32001 (8/00)