2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # J25040				FI ED	
Entity Name GOLDEN EGG ROLL CHINESE RESTAURANT INC.					
				08 DEC -8 PH 4: 25	
7.000111211111222111		7900 ATLANTIC BLVD.		LEGRETARY OF STUDE ALLAHASSEE, FLORIDA	
	LE, FL 32211	JACKSONVILLE, FL 3221	11	i iseriis ana ikaoi omi armi sish arn sirii dish sish sish bish bish	P91 (1 1 1 P 1
Principal Place of Business - No P.O. Box # 3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
		City & State		02052008 REIN-P CR2E098 (1/07) 4. FEI Number Apr	olied For
City & State				59-2714253 Not	Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired See Required	
	6. Name and Address of Current	Registered Agent	Name	7. Name and Address of New Registered Agent	
CHAN, KEITH			Hoi CHAN TUNG Street Address (P.O. Box Number is Not Acceptable)		
293 LAZY MEADOW DR W JACKSONVILLE, FL 32225			Sired Address (P.O. Box Number is Not Acceptable)		
0, 10, 10011			16.	08 NOTTINGHAM KNOLL DRIN	
			City D	Advonthe FL Zip Code	245
	named entity submits this statement for tions of registered agent.	or the purpose of changing its re	egistered office or	registered agent, or both, in the State of Florida. I am familiar with, a	and accept
·	(La Turk	1257			
SIGNATURE.	Signature, typed or printed name of epistered agent	and title if applicable. (NOTE:	Registered Agent signs	ture required when reinstating) DATE	••
FII	LE NOW!!! FEE IS \$300.00			In accordance with s. 607.193(2)(b), F corporation did not receive the prior n	F.S., the otice.
10.	OFFICERS AND		11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	IN 11
TITLE NAME	P CHAN, KEITH	Delete	TITLE NAME		☐ Addition
STREET ADDRESS CITY-ST-ZIP	293 LAZY MEADOW DRIVE, W. JACKSONVILLE, FL 32225		STREET ADDRESS CITY-ST-ZIP	900138686919 12/08/0801043018 **500.0	00
TITLE	VP	☐ Delete	TITLE	☐ Change	☐ Addition
NAME STREET ADDRESS	HOI, CHAN TUNG 293 LAZY MEADOW DRIVE. W.		NAME STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE, FL 32225		CITY-ST-ZIP		
TITLE NAME		☐ Delete	TITLE Name	VICE PRESIDENT Change	Addition
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP	1608 NOTTINGHAM KNOLL DA TACKSONVILLE, & BLZZE	
TITLE		☐ Delete	TITLE		Addition
NAME STREET ADDRESS			name Street address		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	, , , , , , , , , , , , , , , , , , ,	☐ Delete	TITLE	☐ Change	Addition
NAME			NAME Street address		
STREET ADDRESS	!		CITY-ST-ZIP		
STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
CITY-ST-ZIP		☐ Delete	TITLE NAME		
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ Delete	NAME Street Address		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRESS CITY-ST-ZIP		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby indicated	d on this report or supplemental report i	h this filing does not qualify for s true and accurate and that m	NAME STREET ADDRESS CITY-ST-ZIP the exemptions conviginature shall h	ontained in Chapter 119, Florida Statutes. I further certify that the in ave the same legal effect as if made under cath; that I am an officer	formation or director
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby indicated of the coof the	d on this report or supplemental report i	h this filing does not qualify for is true and accurate and that movered to execute this report a	NAME STREET ADDRESS CITY-ST-ZIP the exemptions conviginature shall h	ontained in Chapter 119, Florida Statutes. I further certify that the intave the same legal effect as if made under oath; that I am an officer upter 607, Florida Statutes; and that my name appears in Block 10 or	formation or director
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby indicated of the coof the	d on this report or supplemental report reporation or the receiver or trustee empt, or on an attachment with an address,	h this filing does not qualify for is true and accurate and that movered to execute this report a	NAME STREET ADDRESS CITY-ST-ZIP the exemptions c y signature shall h as required by Cha	ontained in Chapter 119, Florida Statutes. I further certify that the in ave the same legal effect as if made under cath; that I am an officer	formation or director

Q GA