

# **2014 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# K64113

**FILED**  
**Oct 28, 2014**  
**Secretary of State**

**Entity Name:** HOUSE OF LEE AND CHOY, INC.

**Current Principal Place of Business:**

1756 SE PORT ST LUCIE BLVD  
PORT ST LUCIE, FL 34952 US

**New Principal Place of Business:**

**Current Mailing Address:**

1756 SE PORT ST LUCIE BLVD  
PORT ST LUCIE, FL 34952 US

**New Mailing Address:**

**FEI Number:** 65-0112686

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LEE, SAI C  
1622 SE GRAPELAND AVE  
PORT ST LUCIE, FL FL34952 US

**Name and Address of New Registered Agent:**

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.

**SIGNATURE:** SAI LEE

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** LEE, SAI C  
**Address:** 1622 SE GRAPELAND AVE  
**City-St-Zip:** PORT ST LUCIE, FL 34952

**Title:** ST  
**Name:** LEE, CHUK F  
**Address:** 2069 SE AVON PARK DRIVE  
**City-St-Zip:** PORT ST LUCIE, FL 34952

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

**SIGNATURE:** SAI LEE

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

P

10/28/2014

\_\_\_\_\_  
Date