## PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

## APPLICATION FOR REINSTATEMENT



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

DOC	JMEI	NT#

L80853

1. Corporation Name

ZHI-JIAN CORPORATION, INC.

Principal Place of Business

Mailing Address

27100 S. DIXIE HWY MARANJA FL 33032 15482 SW 163 ST MIAMI FL 33187

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REINSTATTMENT ~

FILED

03 NOV -3 PH 1:43

If above addre	esses are incorrect in any way, line	through incorrect information and enter correction below.	LITTIAO (147 - "AI	LIVI US
New Principal Office Address, If Applicable     Suite, Apt. #, etc.		3. New Mailing Office Address, If Applicable  2 T 00 S 0 X; E HwY.  Suite, Apt. #, etc.	Date Incorporated or Qualified     To Do Business in Florida     06/15/1990	
			5. FEI Number	Applied For
City & State		City & State	65-0203539	Not Applicable
Zip	Country	Zip Country 33032 US	6. CERTIFICATE OF STATUS DESIRED	\$8.75 Additional Fee required for a Certificate of Status
7 Names and	Street Addresses of Each Officer as	nd/or Director. (Elevida generalit corporations must list at les	et 3 directore)	

Title(s)	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	TAN, ZHI JIAN	15482 SW 163 ST	MIAMI FL
STD	TAN, QUI LIAN	15482 SW 163 ST	MIAMI FL
D	TAN, SHU JIAN	15482 SW 163 ST	MIAMI FL
		1.1	000024391490 <del>/03/03 01108 022 **150.00</del>
			.7037 <u>037-01108022 **150.00</u>

8. Name and Address of Current Registered Agent	9. Name and Address of New Registered Agent		
	Name	· · · · · · · · · · · · · · · · · · ·	
PETEROAN WARE A	الراب المودورات الموضعة العالمية المواساء وهمومسيومية الماسين		
PETERSON, WADE C.	Street Address (P.O. Box Number is Not Acceptable)		
590 ENGLISH AVENUE			
HOMESTEAD FL 33030	Suite, Apt. #, Etc.		
	City	State   Zip Code	
		<b>FL</b>	
being appointed the registered agent of the above named cornoration, am fa	miliar with and accept the obligations of Section 6	07.0505 ES or 617.0505 ES	

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. or 617.0505, F.S

Signature of Registered Agent \_\_\_

REGISTERED AGENT MUST SIGN

Date \_\_\_\_\_

11. 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.

SIGNATUR

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIR

10-27-03

305-247-1688

Daytime Phone #

Zhi-Jian Corporation, Inc. China Garden 27100 S. Dixie Hwy. Naranja, FL. 33032

October 27, 2003

Division of Corporations Annual Report/Reinstatement Section PO Box 6327 Tallahassee, FL. 32314-6327

RE: Requesting Reinstatement Fee be Waive

Dear Sir or Madam;

This is to request reinstatement fee waived. We did not receive the two prior uniform business reports (UBR) notice for 2003. We have always filed our report on time in the past 13 years that we have the business.

In the light of above, please waive our reinstatement fee. We are very appreciated for your assistant in this matter. Should you have any question, please contact me at 305-247-1688.

Sincerely yours,

Zhi Jian Tan

President