

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 MAR -4 PM 1:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000000071

1. Corporation Name
TAIWAN BUSINESS ASSOCIATION IN FLORIDA, INC.

Principal Place of Business Mailing Address
3401 N. FEDERAL HWY STE 209 BOCA RATON, FL 33431 SAME

500005180295--2
-04/01/02--01078--004
*****61.25 *****61.25

[Handwritten signature]
01-02
UBRC

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

| | | | | | |
|------------------------------------------------|--|----------------------------------------------|--|-------------------------------------------------------------|--|
| 2. New Principal Office Address, If Applicable | | 3. New Mailing Office Address, If Applicable | | 4. Date Incorporated or Qualified To Do Business in Florida | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. FEI Number | |
| City & State | | City & State | | 65-0547474 | |
| Zip | | Country | | 6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> | |
| | | | | S8.75 Additional Fee required for a Certificate of Status | |

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| 1 Title(s) | 2 Name of Officers and/or Directors | 3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers) | 4 City / State / Zip |
|------------|-------------------------------------|---------------------------------------------------------------------------------------|-------------------------------------------------------------------|
| D | NG, JOHNNY | 1480 NW 96TH AVE | MIAMI, FL 33172 |
| D | KUNG, DAVID | 4601 NW 72ND AVE | MIAMI, FL 33166 |
| D | CHAO, JANE | 3401 N FEDERAL HWY #209 | BOCA RATON, FL 33431 |
| | | | 500005180295--2 -04/01/02--01078--003 *****61.25 *****61.25 |

| | | | |
|--------------------------------------------------|--|----------------------------------------------------------------------------------|-------------|
| 8. Name and Address of Current Registered Agent | | 9. Name and Address of New Registered Agent | |
| YU, JIN YEN 2234 NW 82 AVE MIAMI, FL 33167 | | Name JANE CHAO | |
| | | Street Address (P.O. Box Number is Not Acceptable) 3401 N FEDERAL HWY STE 209 | |
| | | Suite, Apt. #, Etc. | |
| | | City OBOCA RATON | State FL |
| | | Zip Code 33431 | |

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.
Signature of Registered Agent *Jane Chao* REGISTERED AGENT MUST SIGN Date 1/11/02

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No (See other side for information on intangible tax.)

12. 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: *Jane Chao* DATE: 1/11/02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E340 (1/98)