

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

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CORPORATION



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 MAY -6 PM 12:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000025896

1. Corporation Name

HOC HOI, INC.

500005556035--8

-05/17/02--01004--028

****300.00 ****300.00

2. Principal Office Address

2702 N. DALE MABRY HWY

3. Mailing Office Address

P.O. BOX 17280

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TAMPA FL

City & State

TAMPA FL

Zip

33607

Country

USA

Zip

33682-7280

Country

USA

4. Date Incorporated or Qualified
To Do Business in Florida

3/7/2000

5. FEI Number

13-4109543

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

WEN CHEN

Street Address (P.O. Box Number is Not Acceptable)

2702 N. DALE MABRY HWY

Suite, Apt. #, Etc.

City

TAMPA

State

FL

Zip Code

33607

8. 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

Wen Chen

Date 4/26/2002

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
D	WEN CHEN	2702 N. DALE MABRY HWY TAMPA FL 33607	

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)(f), 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:

Wen Chen

WEN CHEN

4/26/2002

813-998-9222

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E081 (9/01)

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GOLD, RESNICK & FICARROTTA, P.A.
ATTORNEYS AT LAW

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Eddy R. Resnick†
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MBOUTZ@GOLDRESNICK.COM

In Affiliation With:
Gold, Resnick & Silverman, P.L.
Clearwater, Florida

March 29, 2002

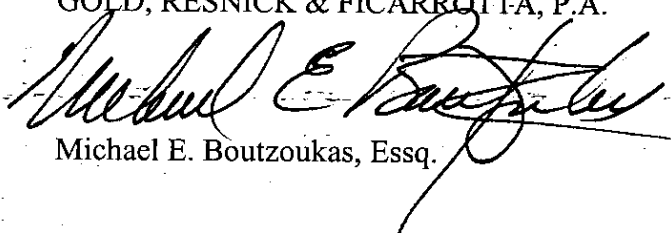
Attn: Reinstatements
Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Reinstatement of Ho Choi, Inc.
Document No. P00000025896
Our File No. 5301.000

Dear Sir/Madam:

Please accept this request to waive the reinstatement fee for the above-referenced corporation. As you can see from the attached printout of the corporate information obtained on your internet access site, the mailing address for the corporation is incomplete and my client never received the annual business report forms. Enclosed is my client's check for \$300.00 representing the annual fees for the years 2001 and 2002. Please advise if this is acceptable.

Respectfully,
GOLD, RESNICK & FICARROTTA, P.A.



Michael E. Boutzoukas, Essq.

CC: Ho Choi, Inc.