

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P00000090994

Entity Name: ANKAI JAPANESE RESTAURANT, INC.

FILED
Nov 06, 2007
Secretary of State

Current Principal Place of Business:

9029 GREEN MEADOWS WAY
PALM BEACH GARDENS, FL 33418

New Principal Place of Business:

Current Mailing Address:

9029 GREEN MEADOWS WAY
PALM BEACH GARDENS, FL 33418

New Mailing Address:

5481 NW COMMODORE TERRACE
PORT ST. LUCIE, FL 34983

FEI Number: 65-1044608

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANKAI, ANNA
9029 GREEN MEADOWS WAY
PALM BEACH GARDENS, FL 33418 US

Name and Address of New Registered Agent:

ANKAI, ALAN
5481 NW COMMODORE TERRACE
PORT ST. LUCIE, FL 34983 US

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: ALAN ANKAI

11/06/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PDS () Delete
Name: ANKAI, KEIJI
Address: 9029 GREEN MEADOWS WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: VTD () Delete
Name: ANKAI, ANNA
Address: 9029 GREEN MEADOWS WAY
City-St-Zip: PALM BEACH GARDENS, FL 33418

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PDS (X) Change () Addition
Name: ANKAI, ALAN
Address: 5481 NW COMMODORE TERRACE
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: VTD (X) Change () Addition
Name: ANKAI, KEIJI
Address: 5481 NW COMMODORE TERRACE
City-St-Zip: PORT ST. LUCIE, FL 34983

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALAN ANKAI

PDS

11/06/2007

Electronic Signature of Signing Officer or Director

Date