PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION REINSTATEMENT

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 OCT 28 PM 12:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

700008639057
10/28/02--01136--015 **150.00

DOCUMENT # P00000114167

1. Corporation Name

SUSHI HOUSE OF JACKSONVILLE INC

2. Principal Office Address	3. Mailing Office Address
9810 BAYMEADOWS RD	
Suite, Apt. #, etc. # 12	Suite, Apt. #, etc.
City & State JACKSONVILLE, FL	City & State
Zip 32256 / Country DUVAL	Zip / Country

4. Date Incorporated or Qualified – To Do Business in Florida 12/8/2000

5. FEI Number 59-3686465 ☐ 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: QIU HEYING

Street Address (P.O. Box Number is Not Acceptable): 9810 - 12 BAYMEADOWS ROAD

Suite, Apt. #, Etc.:

City: JACKSONVILLE | State: FL | Zip Code: 32256

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: Heying Qiu — REGISTERED AGENT MUST SIGN — Date: 10/25/02

CR2E081 (9/01)

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
P	HEYING QIU	9810-12 BAYMEADOWS RD	JACKSONVILLE FL 32256
V/P	CHEN DE QING	9810-12 BAYMEADOWS RD	JACKSONVILLE FL 32256

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)(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: Heying Qiu — 10/25/02 — (407)474-2454

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

jp 11/4/02

Oct 26, '02

Dept of State

Division of Corporations

Sushi House of Jacksonville Inc, P00000114167

Re: 2002 Uniform Business Report

Dear Sir:

I am writing to you in reference to the annual report fee for Sushi House of Jacksonville Inc. I have never received your 1st and second annual report through the mail. If I have I would have sent it on time. I later found out the address was 9812-12 but should be 9810-12 (see attached printout) that may explain the reason for not getting your mail. I am so sorry that I have to reinstate now. I have called the Dept of State and I was told to write a letter for the explanation & you might be able to waive the reinstatement fee. I am now submitting the reinstatement form along with a check of $150.00 for reinstatement. Please waive the fees for the reasons that I have described above. I would very much appreciate for your consideration. Thank you for your attention.

Hoping for