

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

02 DEC 23 PM 12:43

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P01000001345

1. Corporation Name

FU HUA CHINESE RESTAURANT, INCORPORATED

500009670475  
12/24/02--01043--015 \*\*150.00

2. Principal Office Address

4065 S Goldenrod Rd

Suite, Apt. #, etc.

City & State

Orlando, FL

Zip

32822

Country

Orange

3. Mailing Office Address

6530 SWISSCO DR

Suite, Apt. #, etc.

Apt. # 1133

City & State

Orlando, FL

Zip

32822

Country

Orange

4. Date Incorporated or Qualified  
To Do Business in Florida

1-1-2001

5. FEI Number

06-1664810

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

Li Ping Li

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

6530 SWISSCO DR

Suite, Apt. #, Etc.

Apt. # 1133

City

Orlando

State

FL

Zip Code

32822

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

REGISTERED AGENT MUST SIGN

Date 12-19-02

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	Tao Zhang	6530 SWISSCO DR #1133	Orlando, FL. 32822
S	Li Ping Li	6530 SWISSCO DR #1133	Orlando FL 32822

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:

Li Ping Li

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12-19-02

Date

407-888-0674

Daytime Phone #

CR2E081 (9/01)

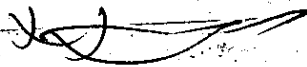
Dear officer:

I would like to renew FU HUA  
CHINESE RESTAURANT, INCORPORATED. Ref Number:  
P0100000034. Certificate.

I did not receive 2003 U.B.R. I  
request to waive the Penalty fee.

Here I include another \$150.00 for 2003 U.B.R.  
Thank You.

Li Ping Li



12-19-02