

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION



FLORIDA DEPARTMENT OF STATE

Jim Smith

Secretary of State

DIVISION OF CORPORATIONS

FILED

02 DEC -6 PM 2:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

020000
REINSTATEMENT

DOCUMENT # P01000012601

1. Corporation Name

SAKURA EXPRESS, INC.

Principal Place of Business

9753 NW 41 STREET
MIAMI FL 33176

Mailing Address

9753 NW 41 STREET
MIAMI FL 33176



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

2. New Principal Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

3. New Mailing Office Address, If Applicable

Suite, Apt. #, etc.

City & State

Zip

Country

4. Date Incorporated or Qualified
To Do Business in Florida

02/02/2001

5. FEI Number

05-1073916

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 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)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PD	AN, BOK H	9753 NW 41 STREET	MIAMI FL 33176
VD	KIM, SANG KI	9753 NW 41 STREET	MIAMI FL 33176

8. Name and Address of Current Registered Agent

AN, BOK H
9753 NW 41 STREET
MIAMI FL 33176

9. Name and Address of New Registered Agent

Name

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

Suite, Apt. #, Etc.

City

State
FL

Zip Code

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. or 617.0505, F.S.

Signature of
Registered Agent

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

11. 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

BOK AN

Date

Daytime Phone #

12/02/02 (305) 477-4477

CR2E040 (8/02)

WORLD CUISINE
SUSHI BAR & GRILL

Yasumoto
BISTRO

BAL HARBOUR SHOPS

SECOND FLOOR

9700 COLLINS AVENUE

BAL HARBOUR, FL

33154

(305) 861-5475

(305) 861-1518 FAX

Sakura
Japanese Restaurant

GABLES

440 SOUTH DIXIE HWY.

CORAL GABLES, FL 33146

(305) 665-7020

(305) 665-6127 FAX

DORAL

9758 NORTHWEST 41 ST.

MIAMI, FL 33178

(305) 477-4477

(305) 477-7613 FAX

CORPORATE HEADQUARTERS

BAL HARBOUR SHOPS

SUITE 235

9700 COLLINS AVENUE

BAL HARBOUR, FL

33154

(305) 861-5475

(305) 861-1518 FAX

EMAIL

BokHwanAN@AOL.com

Sakura Express, Inc.

9753 NW 41 Street

Miami, FL 33178

December 2, 2002

Florida Department of State

Division of Corporations

Annual Report/ Reinstatement Section

PO BOX 6327

Tallahassee, FL 32314-6327

Attn: Jill Smith

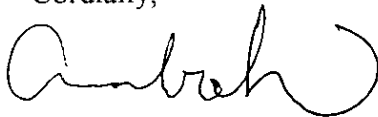
Dear Florida Department of State:

Subject: Uniform Business Report / Reversal of Revocation

Reference Number: P01000012601

Our company has already paid for the Uniform Business Report for a total of \$158.75. We have not received any warning letters of administrative dissolution or revocation. Please waive this reinstatement. We have paid everything on time and still await for the certificate for the Uniform Business Report. Thank you.

Cordially,



Bok An

Owner

Sakura Express, Inc.

A.C.