

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
AND
FILED

1/2 TX1

**CORPORATION
REINSTATEMENT**

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

6 JAN 03 AM 7:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P01000112479

1. Corporation Name

BUSHI AND BASHI INC

2. Principal Office Address

2412 CHADWICK CT

Suite, Apt. #, etc.

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

ORLANDO, FL

Zip

Country

Zip

Country

32818

REINSTATEMENT

05-01

4. Date Incorporated or Qualified
To Do Business in Florida

5. FEI Number

52-2560094

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

FITZROY WRIGHT

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

2412 CHADWICK CT

Suite, Apt. #, Etc.

City

ORLANDO

State

FL

Zip Code

32818

200063317042
01/10/06--01041--003 **\$600.00

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

[Signature]

Date **11/1/2005**

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
PD	FITZORY WRIGHT	2412 CHADWICK CT	ORLANDO, FL. 32818

\$300⁰⁰
Apply

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, 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11/1/2005

Date

(407) 822-7640

Daytime Phone #

K. Eckel JAN 03 2006



12/1/05

Price Accounting Firm, Inc. 2/c.

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
REINSTATEMENT DEPARTMENT
TALLAHASSEE, FLORIDA

Price Accounting Firm, Inc.

To Whom It May Concern,

This letter is to inform you that Bushi And Bashi Inc., did not receive the annual corporate report form. The corporation expired, and the corporation annual report was not mailed to the current shareholder. The current shareholder was not aware of the Annual Report and, the address of record was not updated, thus the current shareholder did not inquire about the report. Due to these facts we are asking that you waive the reinstatement fee. Enclosed is a check for the outstanding amount due over a period of one years.

Your consideration concerning this matter is greatly appreciated.

Cordially yours,

Fitzory Wright
Fitzory Wright

Julius Price
Julius Price
Price's Accounting Firm Inc.

RECEIVED
05 DEC 28 PM 5:01
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA