


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

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<b>CORPORATION REINSTATEMENT</b>		<b>FLORIDA DEPARTMENT OF STATE</b> Secretary of State DIVISION OF CORPORATIONS

FILED  
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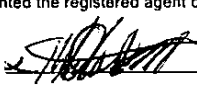
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CR2E081 (12/05)

DOCUMENT # <b>P02000027355</b>			
1. Corporation Name <b>GA WAH Inc.</b> <b>d/ola Chester Fried chicken</b>			
2. Principal Office Address <b>5350 NW 31 Ave</b>		3. Mailing Office Address <b>2619 Harding Street</b>	
Suite, Apt. #, etc. <b>101</b>		Suite, Apt. #, etc.	
City & State <b>FT. Lauderdale, FL</b>		City & State <b>Hollywood, FL</b>	
Zip <b>33309</b>	Country <b>US</b>	Zip <b>33020</b>	Country <b>US</b>

4. Date Incorporated or Qualified To Do Business in Florida <b>05-14-02</b>	
5. FEI Number <b>03-0437375</b>	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$8.75 Additional Fee required for a Certificate of Status	


7. Name and Address of Current Registered Agent			
Name <b>Michael Tam</b>			
Street Address (P.O. Box Number is Not Acceptable) <b>2619 Harding Street</b>			
Suite, Apt. #, Etc.			
City <b>Hollywood</b>		State <b>FL</b>	Zip Code <b>33020</b>

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 	Date <b>4-13-2006</b>
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
P.O.	Michael Tam	2619 Harding Street	Hollywood, FL 33020
S.T.	Yuk chun Tam	2619 Harding Street	Hollywood, FL 33020

**4/21/06**

**REINSTATEMENT 04-06**

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 contained in Chapter 119, 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: 	Date <b>4-13-2006</b>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	
Daytime Phone #	

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**GA WAH INC.  
d/b/a Chester Fried Chicken  
5550 NW 31 Avenue  
FT. Lauderdale, FL 33309**

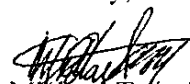
April 11, 2006

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

To whom it may concern,

The letter is to put in writing that the Company did not receive the annual report notices in the year of dissolution/revocation.

Sincerely,



Michael Tam, President