PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE Glenda E. Hood

Secretary of State

DIVISION OF CORPORATIONS

P02000092534 **DOCUMENT #**

1. Corporation Name

KOSHER JAPANESE RESTAURANT, INC.

Principal Place of Business

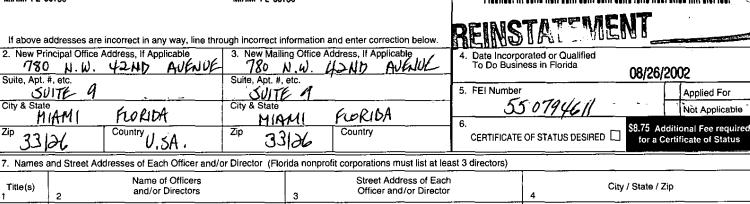
Mailing Address

9300 S DADELAND BLVD STE 508 MIAMI FL 33156

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MIAMI FL 33156

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| 1 | 2 | and/or Directors | 3 Officer and/or Director | 4 |
|----|---------------|-------------------|------------------------------|---|
| P | KON, MASAYUKI | | 9390 S DADELAND BLVD STE 508 | -MIAMI FL-33156 |
| ٧ | YOSHINORI, | MIZUMA, YOSHINORI | 9300 S DADELAND BLVD STE 508 | MIAMI FL 33156 |
| | | | | 400024579984 11/12/0301010016 **150.00 |
| ** | | | | |
| | | 7 | | |
| | | | | |
| | 0 Name == | -4 A Julius | O N- | and Address of New Docisioned Acous |

Name KON, MASAYUKI Street Address (P.O. Box Number is Not Acceptable) 9300 S DADELAND BLVD STE 508 780 N.W. 4246 780 JUTTE 9 Suite, Apt. #, Etc. MIAMI FL 93156 MIAM, FL 33126 Zip Code 33/34 State 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

REGISTERED AGENT MUST SIGN

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

:R2E040 (7/03)

November 04, 2003

Division of Corporations

Annual Report/Reinstatement Section
P.O. Box 6327

Tallahassee, Florida 32314-6327

Dear Sir:

We received a "Notice of Administrative Dissolution or Revocation" on November 3, 2003. The notice states that we failed to file our 2003 corporation annual report/uniform business report. There must be a misunderstanding, since, this is the first time we received this notice and furthernore, our address has changed. Therefore, could you please waive the reinstatement fee of \$600.00

We are enclosing the "Application for Reinstatement" with the original fee of \$150.00.

Thank you for your kind attention in this matter.

Sincerely,

Masayuki Kon