

# **2012 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P02000105385

**FILED**  
**Feb 21, 2012**  
**Secretary of State**

**Entity Name:** LULU'S GARDEN INC.

**Current Principal Place of Business:**

3812 SKYLINE BLVD UNIT B  
CAPE CORAL, FL 33914 US

**New Principal Place of Business:**

**Current Mailing Address:**

3812 SKYLINE BLVD UNIT B  
CAPE CORAL, FL 33914 US

**New Mailing Address:**

**FEI Number:** 50-0007203

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

WEI, XINGCUN  
2696 BELLINGHAM CT  
CAPE CORAL, FL 33991 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:** XINGCUN WEI

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** DP  
**Name:** WEI, XINGCUN  
**Address:** 2696 BELLINGHAM CT  
**City-St-Zip:** CAPE CORAL, FL 33991 US

**Title:** DVPS  
**Name:** LU, XIAOJIE  
**Address:** 2696 BELLINGHAM CT  
**City-St-Zip:** CAPE CORAL, FL 33991 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** XINGCUN EEI

PRES

02/21/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date