2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000118646 TOASTY FOOD CORPORATION Principal Place of Business Mailing Address 14437 DOVER FOREST DRIVE 14437 DOVER FOREST DRIVE ORLANDO, FL 32828 US ORLANDO, FL 32828 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc 10122005 REIN-P CR2E098 (6/04) City & State City & State 4. FEI Number Applied For 01-0752226 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JEONG, YI H Street Address (P.O. Box Number is Not Acceptable) 14437 DOVER FOREST DRIVE ORLANDO, FL 32828 City FL Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. After January 1, 2006, Fee will be \$300.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change JEONG, YIH NAME NAME 000060689850 14437 DOVER FOREST DRIVE STREET ADDRESS STREET ADDRESS 10/17/05--01074--019 **158.75 C!TY-ST-ZIP ORLANDO, FL 32828 CITY-ST-ZIP VP.S TITLE ☐ Delete TITLE ☐ Change NAME JEONG, TINA I NAME STREET ADDRESS 14437 DOVER FOREST DRIVE STREET ADDRESS ORLANDO, FL 32828 CITY-ST-ZIP CITY-ST-ZIP D ☐ Change ■ Addition TITLE ☐ Delete TITLE JEONG, YI H NAME **TABLE** STREET ADDRESS 14437 DOVER FOREST DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO, FL 32828 Change ☐ Delete TITLE Addition TITLE JEONG, TINA 1 NAME NAME 14437 DOVER FOREST DRIVE STREET ADDRESS STREET ADDRESS ORLANDO, FL 32828 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE . Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-782 CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. H. Jeona SIGNATURE: