

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P03000076888

Entity Name: DAH SING LIN GARDEN, INC.

FILED
Oct 13, 2005
Secretary of State

Current Principal Place of Business:

3273 S. JOHN YOUNG PARKWAY
KISSIMMEE, FL 34746

New Principal Place of Business:

Current Mailing Address:

3273 S. JOHN YOUNG PARKWAY
KISSIMMEE, FL 34746

New Mailing Address:

FEI Number: 55-0840012

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SING LIN, DAH
3273 S. JOHN YOUNG PARKWAY
KISSIMMEE, FL 34746 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: DAH SING LIN

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SING LIN, DAH
Address: 3273 S. JOHN YOUNG PARKWAY
City-St-Zip: KISSIMMEE, FL 34746

Title: VD () Delete
Name: HUANG, MEX XIAN
Address: 3273 S. JOHN YOUNG PARKWAY
City-St-Zip: KISSIMMEE, FL 34746

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: DAH SING LIN

Electronic Signature of Signing Officer or Director

PD

10/13/2005

Date