

2006 FOR PROFIT CORPORATION REINSTATEMENT

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FILED
06 FEB -6 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01262006 REIN-P CR2E098 (11/05)

DOCUMENT # P04000030944 1. Entity Name PORT CHARLOTTE TASTY WOK, INCORPORATED					
Principal Place of Business 4265 TAMiami TRAIL, #B PORT CHARLOTTE, FL 33980			Mailing Address 4265 TAMiami TRAIL, #B PORT CHARLOTTE, FL 33980		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 20-0735403	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent LU, YU FU 4265 TAMiami TRAIL, #B PORT CHARLOTTE, FL 33980				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				\$8.75 Additional Fee Required	
SIGNATURE <u>X</u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE <small>(NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LU, YU FU 4265 TAMiami TRAIL, #B PORT CHARLOTTE, FL 33980	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LU, YU FU 4265 TAMiami TRAIL, #B PORT CHARLOTTE, FL 33980	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LU, YU FU 4265 TAMiami TRAIL, #B PORT CHARLOTTE, FL 33980	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LU, YU FU 4265 TAMiami TRAIL, #B PORT CHARLOTTE, FL 33980	<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.					
SIGNATURE: <u>X Lu yu fu</u>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date <u>2/6/06</u> Daytime Phone #					

ATTACHMENT

PS 2/22

~~#P04000030944~~

Division of Corporation
P O Box 6327
Tallahassee, FL 32314

January 26, 2006

Re:
Port Charlotte Tasty Wok, Inc.
2005 - 2006 UBR Form filing
PP04000030944

Dear sir:

We have never received the original notice to file the 2005 Uniform Business Report and thus did not make the payment. Please waive the late filing penalty.

Enclosed please find payment in the amount of \$300 for the 2005 and 2006UBR filing.

Thank you very much for your assistance.

Sincerely,

x *JuFu Lu*

Yu Fu Lu, president
Port Charlotte Tasty Wok, Inc.
4265 Tamiami Tr Unit B
Pt Charlotte, FL 33946