2007 FOR PROFIT CORPORATION REINSTATEMENT

REINSTATEMENT					FILED				
DOCUMENT # P05000011137									
1. Entity Nam GARDEN	& WATERFALL, INC.				07 MAR -9 AM 7: 41				
Principal Plan	a of Business	Maitian Address	63.		5t TA i	JUKE IARY JEAHASSE	OF STATE E. FLORID.	Λ	
Principal Plac 6129 RALEI		Mailing Address P.O. BOX 616729					ETT EUTION		
APT 812 ORLANDO, FI	L 32835 US	ORLANDO, FL 32861	US						
	flace of Business - No P.O. Box #	3. Mailing Address	<u>.</u>						
730	Santee Terre Ln.	730 Santes	30 Santee Terre Ln		LLE 91				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		1		TAId		OF TO	
City & State	ier Garden	City & State Winter Garden			4. FEI Number 20-23	11717		plied For Applicable	
Zip 3 4 7	Country	Zip 34787	Country		5. Certificate of Status		\$8.75 Addi	itional	
347	6. Name and Address of Current		us		7. Name and Address	of New Register	Fee Required red Agent	j 	
CHANG, S	SAN HOU	-		Char		tou			
6129 RALEIGH ST APT 812				Street Address (P.O. Box Number is Not Acceptable)					
ORLANDO, FL 32835				730 Santee Terre Ln					
		City	City Winter Garden FL 34787						
8. The above the obligat	named entity submits this statement for ions of registered agent.	or the purpose of changing its re	gistered office o	registere	d agent, or both, in the S	tate of Florida. I	am familiar with, a	and accept	
SIGNATURE	X San-Hou C	hang			3	-6-6	7		
	Signature, typed or printed name of registered agen	and trie if applicable. (NOTE: I	Registered Agent sign	sture required		DA	/ E	_	
Fil	LE NOW!!! FEE IS \$300.00						607.193(2)(b), F ceive the prior n		
10.	OFFICERS AND		11.	-	ADDITIONS/CHANGE	S TO OFFICERS			
TITLE NAME	CHANG, SAN HOU	☐ Delete	TITLE NAME	CHAN	16, SAN HOL	(Change	Addition	
STREET ADDRESS CITY+ST-ZIP	6129 RALEIGH ST APT 812 ORLANDO, FL 32835		STREET ADDRESS CITY-ST-ZIP	730	Santee Ter				
TITLE	VP	☐ Delete	TITLE	VP			<i>L 3 4787</i> ∑ Change	Addition	
NAME STREET ADDRESS	CHANG, BIH ING DAH 6129 RALEIGH ST APT 812		NAME C STREET ADDRESS	HANG	A, BIH ING Santee Terr	PAH o Ln.Wi	nter Ga	rden	
CITY-SI-ZIP	ORLANDO, FL 32835		CITY-ST-ZDP	750		F	L 3478	7	
NAME		☐ Delete	TITLE NAME				Change	☐ Addition	
STHEET ADDRESS CITY ST-ZIP			STREET ADORESS CITY-ST-ZIP	 					
TITLE		☐ Delete	TITLE				☐ Change	Addition	
NAME STREET ADDRESS			NAME STREET ADORESS	ļ I	4000 03/16/07	9325	1494		
CITY+ST-ZIP			CITY-ST-ZIP		03/16/07	0101101	l? **300.	.00	
NAME		☐ Defete	TITLE NAME				Change	☐ Addition	
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP					ĺ	
IIILE		☐ Delete	TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS					_	
CITY-ST-ZIP		,	CITY-ST-ZIP						
indicated	certily that the information supplied wit I on this report or supplemental report	is true and accurate and that my	signature shall h	ave the sa	ime legal effect as if ma-	de under oath; the	at I am an officer (or director	
	rporation or the receiver or trustee emp , or on an attachment with an address,		s required by Cha	apter 607,	riorida Statutes; and tha	i my name appea	ars in Block 10 or	Block 11 if	
SIGNAT	URE: x San	4 - Holl Chan	g		3-6-07				
	SIGNATURE AND TYPED OR	PRINTED NAME OF SIGNING OFFICER OF	PIRECTOR		Оаге		Daytime Phone #		

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