


2008 FOR PROFIT CORPORATION REINSTATEMENT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 APR 30 PM 12:22

| | |
|--|---|
| DOCUMENT # P06000132005 |  |
| 1. Entity Name CHINA STAR INC OF NORTH FORT MYERS | |

| | |
|---|---|
| Principal Place of Business 5600 BAYSHORE ROAD NORTH FORT MYERS, FL 33917 | Mailing Address 5600 BAYSHORE ROAD NORTH FORT MYERS, FL 33917 |
|---|---|

| | |
|--|---------------------|
| 2. Principal Place of Business - No P.O. Box # | 3. Mailing Address |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip | Country |



04172008 REIN-P CR2E098 (1/07)

| | |
|---------------|--|
| 4. FEI Number | <input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
|---------------|--|

| | |
|----------------------------------|---|
| 5. Certificate of Status Desired | <input type="checkbox"/> \$8.75 Additional Fee Required |
|----------------------------------|---|

| |
|---|
| 6. Name and Address of Current Registered Agent |
| WANG, XU YUN 5600 BAYSHORE ROAD NORT FORT MYERS, FL 33917 |

| |
|--|
| 7. Name and Address of New Registered Agent |
| Name |
| Street Address (P.O. Box Number is Not Acceptable) |
| 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 \$900.00 |
|------------------------------------|

| 10. OFFICERS AND DIRECTORS | |
|----------------------------|------------------------------------|
| TITLE | P <input type="checkbox"/> Delete |
| NAME | WANG, XU YUN |
| STREET ADDRESS | 5600 BAYSHORE ROAD |
| CITY-ST-ZIP | NORTH FORT MYERS, FL 33917 |
| TITLE | VP <input type="checkbox"/> Delete |
| NAME | CHEN, FENG YING |
| STREET ADDRESS | 5600 BAYSHORE ROAD |
| CITY-ST-ZIP | NORT FORT MYERS, FL 33917 |
| TITLE | <input type="checkbox"/> Delete |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Delete |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

| 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|---|---|
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | 500126959095 |
| STREET ADDRESS | 04/30/08--01003--009 **150.00 |
| CITY-ST-ZIP | 04/23/07 90083 025 |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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: | XU YUN WANG | XU YUN WANG | 4-25-08 |
| | SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone # |

PAYC 2012

China Star Inc of North Fort Myers
5660 Bayshore Road
North Fort Myers, FL 33917

April 20, 2008

Dear sirs,

Referring to our telephone conversation with your representative, I found that the 2007 annual report fee has been paid on time and the corporation was administratively dissolved due to a misunderstanding. Therefore I am now paying 2008 report fee of \$150.00 and request that the reinstatement fee be waived.

Thank you very much for your help.

Sincerely,

XU YUN WANG

Xu Yun Wang
President