PLEASE READ ALL INSTRUCTIONS BEFORE CO					NG THIS FORM
APPLICATION - FOR REINSTATEMENT	FLORIDA D Sar Se	EPARTMEN ndra B. Morth ecretary of Sta on of corpora	T OF STATE nam ate		APPROVED AND FILED 96 DEC -6 PM 3: 50
DOCUMENT # P 950000 71738					SECRETARY OF STATE TALLAHASSEE, FLORIDA
LEE CHING INTERNATIONAL, INC.					TALLAHASSEE, FLOTIES
7050 W. Palmetto PK RD #14					
BOCA RATON, FL. 33433 If above addresses are incorrect in any way, line through incorrect information and enter correction below.					DO NOT WRITE IN THIS SPACE
		Address, If Applicable			prated or Qualified ess in Florida Q/r
Suite, Apt. #, etc Suite, Apt. #, etc.			5. FEI Numbe		7/15 / 95 X Applied For
City & State City & State					Not Applicable
Zip Country	Zip	Country		6. CERTIFICATE	OF STATUS DESIRED S8.75 Additional Feerequired
7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each					
Title(s) and/or Directors 1 2	3	Offic	er and/or Director Post Office Box N	umbers)	City / State / Zip
D Fu-Ching Lea	e 7	7050 W. Palmetto Park Road BOCA RATON FL. 3343			
					000020244283
					****375.00 *****375.00
REI			ISTAT	EWENT 1996	
				U. Claw	
					12-10-96
8. Name and Address of Current Registered Agent Name				9. Name and A	ddross of New Registered Agent
Fu Ching Lee 7050 W. Palmetto Park Rood			Street Address (P.O. Box Number Is Not Acceptable)		
1050 W. Faimetto Park Kood			Suite, Apt. #, Etc.		
BOCA RATON, FL.33433			Cily		State Zip Code
10 I, being appointed the registered agent of the above	ve named corporation	on, am familiar with	and accept the ob	oligations of Secti	
Signature of Pegistered Agent First First Date Date					
11. Does this corporation pay any intangible tax to the Dept. of Revenue under S. 199.032, Florida Statutes. Yes No X (See other side for information on intengible tax.)					
lease the Division of Corporations from any liabilit certify that I am an officer or director or the received this reinstatement application the reason for dissi	y of non-compliance var or trustee empor olution has been eli	o with Section 119, wered to execute t iminated, the corpo	07(3)(k) in the eve his application as orate name satisfic	int that the inform provided for in cl as the requiremen	n stated in Section 119.07(3)(k), Florida Statutes. I re- ation supplied is deemed exempt from public access. I tapter 607 or 617, F.S. I further certify that when liling its of section 607.0401 or 617.0401, F.S., and that all signature shall have the same logal effect as if made
SIGNATURE: SIGNATURE AND TYPED OR PUNTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dayling Phono . Dayling Phono .					