

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

FILED

99 FEB 10 PM 3:58

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # 9950000083480

1. Corporation Name

Chicken Bowl, Inc.

Principal Office Address

2296 Main Street Dunedin, Florida 34698

Mailing Address

Same

REINSTATEMENT

96-99 781 2/10/99

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida 11/1/95

5. FEI Number

59-3346669

Not Applicable

CERTIFICATE OF STATUS DESIRED

\$8.75 Additional Fee required for a Certificate of Status

7. Name and Street Addresses of Each Officer and or Director (Florida nonprofit corporations must list at least 3 directors)

Table with 4 columns: Title, Name of Officers and or Directors, Street Address of Each Officer and or Director, City, State, Zip. Row 1: P, VP, S, T. Lei Gui Fei Jiang, 1787 Split Fork Drive, Oldsmar, Florida 34677

600002776606--6 -02/16/99--01027--003 ***1050.00 ***1050.00

600002776606--6 -02/16/99--01027--004 ***150.00 ***150.00

8. Name and Address of Current Registered Agent

Dar S. Hu 6828 Circle Creek Drive Pinellas Park, Florida 34665

9. Name and Address of New Registered Agent

Name: Lei Gui Fei Jiang Street Address (P.O. Box Number is Not Acceptable): 1787 Split Fork Drive Suite, Apt. #, Etc:

City: Oldsmar State: FL Zip Code: 34677

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent: Lei Gui Fei Jiang REGISTERED AGENT MUST SIGN

Date: 1-25-99

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes [] No [X]

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.011(1) or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(a), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Lei Gui Fei Jiang SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 1-25-99 Daytime Phone #