

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

00 DEC 21 PM 1:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000083480
1. Corporation Name
Chicken Bowl, Inc.

2. Principal Office Address
2290 Main St.

3. Mailing Office Address
2290 Main St.

City & State
Clearwater, Florida

City & State
Clearwater, Florida

Zip Country
34698 USA

Zip Country
34698 USA

REINSTATEMENT 2000

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

5. FEI Number **593346069** Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$875 Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name **Lei Gui Fei Jiang** **100003514971-4**

Street Address (P.O. Box Number is Not Acceptable) **1787 Split Fork Dr.** **12/27/00 01082-006**

Suite, Apt. #, Etc.

City **Oldsmar** State **FL** Zip Code **34677**

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent **Lei Gui Fei Jiang** Date **12/20/00**

REGISTERED AGENT MUST SIGN

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

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
P, T, S	Lei Gui Fei Jiang	1787 Split Fork Dr.	Oldsmar, FL 34677

10. 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 607.0401 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)(i), 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** **12/20/00** **(727) 726-9120**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E081 (9/99)