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	PLEASE READ PLICATION . FOR' STATEMENT	ALL INSTRUCTIONS BEFORE OF FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			1			
DOCUMENT # P95000085963 1. Corporation Name					98 JAN 26 PM 12: 59			
RACING ZONE AUTO HOUSE, INC.					SECRETARY OF STATE TALLAHASSEE, FLORIDA			
9633 ISLAP TEMPLE FI US		2780 E FOW UNIT 228 TAMPA FL 3 US	TAMPA FL 33612 US		REINSTATEMENT 7-98			
	addresses are incorrect in any way. line the ncipal Office Address, if Applicable W. NESSAS AVE #, etc.	3 New Maili	3. New Mailing Office Address, If A		Date Incorporated or Qualified To Do Business in Florida 11/06/1995 FEI Number Applied For			
City & State TAMPA , FL		City & State TAMPA FL		, ,	59-3344247 Not Applicable		Not Applicable	
ZIP 33612 Country U.S.A. Zip		3361	2ip33612 Country		CERTIFICATE OF STATUS DESIRED S8.75 Additional Fee required for a Certificate of Status			
7. Names a	and Street Addresses of Each Officer and/ Name of Officers and/or Directors	Stre	Sa nonprofit corporations must list at least 3 direct Address of Each Officer and/or Director		City	State / Zhp		
D	DANNY LAU, YUEN CHIU		3 (Do NOT Use Post Office Box Nun 8699 ISLAND BREEZE LN		lumbers)	TEMPLE TERRACE F		
D	D YUNG, WING YAN			8693 ISLAND BREEZE LN		TEMPLE TERRACE FL		
D DANNY LAM, YUEN CHIM			(0321-N)			-02/03/3301952004 *****900.00 *****900.00		
D PANNY LAN, YNEN CHIN			11309 N. 50th ST. #6		T. #6	TAMPA, FL 3361+		
D	YING, HING Y	ING, HING YAN 11309 N.			50th 57#6 TAMPA, FL 336H			
	8. Name and Address of Current F	nt	Name and Address of New Registered Agent					
* DANNY LAU, YUEN CHIU					ame (688)			
8633 I	ISLAND BREEZE LN LE TERRACE FL 33637	Street Address (P.O. Box Number Is Mot Acceptable) Suite, Apt. #, Etc.				#6 96		
				State Zip Code FL 33617				
10. I, being appointed the registered agent of the above named exporation, am familiar with and accept the obligations of Section 607.0505, F.S. Signature of Registered Agent								
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30. Yes No No No (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 filling 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: (DANNY-YUL) CALL LAW 1/36-0206 SIGNATURE AND TYPED ON PRINTED HAME OF SIGNING OFFICER OR DIRECTOR Date Daylind Phone #								

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