

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT

DOCUMENT # P96000006512

1. Corporation Name

EDDIE & MING INVESTMENT, INC.

Principal Place of Business

Mailing Address

8148 N.W. 74 STREET X AVE
MEDLEY FL 33166

8148 N.W. 74 STREET AVE
MEDLEY FL 33166

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, if Applicable

3. New Mailing Office Address, if Applicable

4. Date Incorporated or Qualified To Do Business in Florida

01/17/1996

Suite, Apt. #, etc.

Suite, Apt. #, etc.

8148 N.W. 74 AVE

8148 N.W. 74 AVE

City & State

City & State

MEDLEY FL

MEDLEY FL

Zip

Zip

33166

33166

Country

Country

5. FEI Number

65-0696188

Applied For

Not Applicable

6.

CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required for a Certificate of Status

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

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
PST	WANG, EDDIE	8148 N.W. 74 STREET X AVE	MEDLEY FL 33166

700002730147--5

-01/05/99-01036-011

****150.00 ****150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

WANG, EDDIE

8148 N.W. 74 STREET X AVE
MEDLEY FL 33166

Name

WANG, EDDIE

Street Address (P.O. Box Number is Not Acceptable)

8148 N.W. 74 AVE

Suite, Apt. #, Etc.

MEDLEY, FL 33166

City

State

Zip Code

FL

33166

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

SIGNATURE REQUIRED

REGISTERED AGENT MUST SIGN

Date

NOV. 18. 98

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☐ 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E040 (9/98)

(2)

EDDIE & MING INVESTMENT, INC.
8148 NW 74 AVE.
MEDLEY, FL. 33166
TEL : (305) 888-6688 FAX : (305) 888-8866

F A C S I M I L E T R A N S M I S S I O N
* * * * *

TO : DIVISION OF CORPORATIONS ATTN : ANNUAL REPORT/
FROM: TERESA JAO X: 108 REINSTATEMENT SECTIO
TOTAL PAGES INCLUDING THIS PAGE : 1 DATE : 11/19/98

DEAR SIR,

ATTACHED PLEASE FIND THE APPLICATION FORM AND PAYMENT CHECK.

THE FILEING ADDRESS WAS WRONG (74TH AVE. NOT 74TH ST.)

THAT IS WHY WE NEVER RECEIVED THE FIRST NOTICE.

IF ANY FURTHER QUESTIONS PLEASE FEEL FREE TO CONTACT ME AT

305-888-6688 EXT:108

THANK YOU VERY MUCH!!