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PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

FILED

06 MAY 25 PM 12:36


SECRETARY OF STATE
TALLAHASSEE, FLORIDA800076205138
06/14/06--01040--023 **1050.00

CR2E081 (12/05)


CORPORATION REINSTATEMENT				FLORIDA DEPARTMENT OF STATE Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P96000006512					
1. Corporation Name EDDIE & MING INVESTMENTS					
2. Principal Office Address 8148 NW 24 AVE.			3. Mailing Office Address 8148 NW 24 AVE.		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State MEDLEY, FL			City & State MEDLEY, FL		
Zip 33166	Country MIAMI DADE	Zip 33166	Country MIAMI DADE		

4. Date Incorporated or Qualified To Do Business in Florida	
5. FEI Number 650696188	Applied For <input type="checkbox"/> Not Applicable
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/> \$9.75 Additional Fee required for a Certificate of Status	

7. Name and Address of Current Registered Agent	
Name TIENTHSIANG EDDIE WANG	
Street Address (P.O. Box Number is Not Acceptable) 8148 NW 24 AVE.	
Suite, Apt. #, Etc.	
City MEDLEY	State FL
	Zip Code 33166

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 	Date 05.23.06
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
	TIENTHSIANG EDDIE WANG	8148 NW 24 AVE	MEDLEY, FL 33166

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 contained in Chapter 119, 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 05.23.06 Daytime Phone # 305 888 9120

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Eddie & Ming Investment
8148 NW 74th Ave.
Medley, FL 33166
Tel: 305-888-9120 Fax: 305-888-8866

May., 23, 2006

To Whom It May Concern:

Ref: Renewal of license – Document #P96000006512

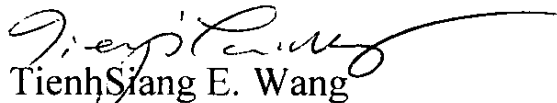
We are located in Medley of Florida. And we do not receive the card for renewal of license.

We are sending the full amount for year 2004 \$1,050.00 & year 2005 \$900.00. But we are going to pay \$150.00 for 2006 renewal.

We kindly request you to accept these checks, due to the fact which we did not receive our mail annually in our office.

Thank you for your understanding.

Sincerely Yours,


TienhSiang E. Wang
President

