


# 2007 FOR PROFIT CORPORATION REINSTATEMENT

<b>DOCUMENT # P96000011792</b>		
1. Entity Name SHOUHA, INC.		
Principal Place of Business <del>141 CREEK DRIVE</del> 2020 TAMiami TRAIL PORT CHARLOTTE, FL 33952		Mailing Address <del>141 CREEK DRIVE</del> 2020 TAMiami TRAIL PO PORT CHARLOTTE, FL 33952
33948		33948

APPROVED  
AND  
FILED  
07 DEC -4 PM 2:25  
25  
12-5-07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



REINSTATEMENT 07

2. Principal Place of Business - No P.O. Box #		3. Mailing Address		4. FEI Number 65-0652054		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
City & State		City & State					
Zip	Country	Zip	Country				
6. Name and Address of Current Registered Agent AL ARNASI, ABE <del>141 CREEK DRIVE</del> 2020 TAMiami TRAIL PORT CHARLOTTE, FL 33952 33948				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code			
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____							
FILE NOW!!! FEE IS \$150.00 After January 1, 2008, Fee will be \$300.00				In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE	P	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	AL-ARNASI, ABE			NAME	300112805233		
STREET ADDRESS	<del>141 CREEK DRIVE</del> 2020 TAMiami TRAIL			STREET ADDRESS	12/04/07--01011--019 **150.00		
CITY-ST-ZIP	PORT CHARLOTTE, FL 33952 33948			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME				NAME			
STREET ADDRESS				STREET ADDRESS			
CITY-ST-ZIP				CITY-ST-ZIP			

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  11/27/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

**Shouha Inc**  
2020 Tamiami Trail  
Port Charlotte, FL 33948  
Phone: 941-613-4020

Date: 11/27/2007

To whom it may concern:

It has come to my attention that we did not pay our Corporation Fee on Time.

I did not receive my update card I usually get, and found out in order to have it mailed to the above address it needs to say Shouha Inc/c/o House of Prime.

This is now where our Corporate Office is located.

Enclosed is the proper paperwork downloaded on line.

Thank You

A handwritten signature in cursive script, appearing to read "Deborah M. Silvernail".

Deborah M. Silvernail  
Secretary