

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

**CORPORATION
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000004746

1. Corporation Name

GOLDEN EGG ROLL CHINESE
RESTAURANT II INC

2. Principal Office Address

7412 LEM TURNER ROAD

Suite, Apt. #, etc.

City & State

JACKSONVILLE FL

Zip

32208

Country

USA

3. Mailing Office Address

Suite, Apt. #, etc.

City & State

Zip

Country

**4. Date Incorporated or Qualified
To Do Business in Florida**

1/13/1997

5. FEI Number

59-3430648

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

CR2E081 (12/05)

7. Name and Address of Current Registered Agent

Name

TUNG HOI CHAN

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

7412 LEM TURNER ROAD

Suite, Apt. #, Etc.

City

JACKSONVILLE

State

FL

Zip Code

32208

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

Tung Hoi Chan

REGISTERED AGENT MUST SIGN

Date

3/13/06

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	CHAN, TUNG HOI	1608 Nottingham Knoll DR Jax FL 32225	
V/P	(CHAN) YIM FAN	1608 NOTTINGHAM KNOLL DR	JACKSONVILLE, FL 32225
			800069059728
			03/30/06--01054--010 **1050.00
			B 3/22/04
			REINSTATEMENT 04-04

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:

Tung Hoi Chan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/06

Date

Daytime Phone #