PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM. RTMENT OF STATE APPLICAT ine Harris ary of State REINSTATE FILED CORPORATIONS P99000077992 DOCUMENT # 00 NOV 22 AM 10: 35 1. Corporation Name SECRETARY OF STATE, TABEAHASSEE, FLORIDA GOLDEN PALACE CHINESE RESTAURANT INC. Principal Place of Business Mailing Address 362-B W. GRANADA BLVD. 362-B W. GRANADA BLVD. ORMOND FL 32174 ORMOND FL 32174 If above addresses are incorrect in any way, line through incorrect information and enter correction below. 3. New Mailing Office Address, If Applicable Date Incorporated or Qualified To Do Business in Florida 2. New Principal Office Address, If Applicable 08/30/1999 Suite, Apt. #, etc. Suite, Apt. #, etc. 5. FEI Number Applied For City & State City & State Not Applicable \$8.75 Additional Fee required for a Certificate of Status Country Zip 7ip Country CERTIFICATE OF STATUS DESIRED 7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors) Name of Officers Street Address of Each City / State / Zip Title(s) Officer and/or Director Resident 32174 400003496674---3 -12/12/00--01034--001 ****150.00 ****150.00 9. Name and Address of New Registered Agent 8. Name and Address of Current Registered Agent Name TAN, KUEI CHEN. Street Address (P.O. Box Number is Not Acceptable) 362-B W. GRANADA BLVD. Suite, Apt. #, Etc. **ORMOND FL 32174** Zip Code City 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 11. 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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To: FLA. Dept of State

DAVIOR OF ConpoRASION P = Box 6327 Tellebesser 2 32314

Feory. Golden Palace Chinese Restaurant The (Dec P 99000077992)

2000 Uniform Businers Report Fee

Dear Sir: Per my conversation with one of your representative that I called today in regards to my zoo annual fee. I explained to you that I have not received the uniqueal Business Report of the second report that was mailed by your office in early January & June 2000. It must have been lost in the mail. I have not paid lote Before. I was told by your after lodes that your office would waive the penalty bee 1 \$ 600. " on enclosing the \$150 - to renew my Corporation fee. I am doing that today.

Thank you for your cooperation.

Kuei Che Tan