

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION FOR REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
 Glenda E. Hood
 Secretary of State
 DIVISION OF CORPORATIONS

FILED

03 OCT 22 PM 4:51

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DOCUMENT # P99000057451

1. Corporation Name

SUNSHINE CENTURY CORP.

Principal Place of Business

Mailing Address

5514 W RIVER BOTTOM AVE
 FRESNO CA 93722

~~2753 STATE ROAD 580~~
~~SUITE #101~~
 CLEARWATER FL 33761

706 TURNBULL AVE
 S-103
 ALTAMONTE
 SPRINGS FLA. 32701



REINSTATEMENT

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	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		06/24/1999	
City & State		City & State		5. FEI Number	
Zip		Zip		59-3583210	
Country		Country		Applied For	
				Not Applicable	
6. CERTIFICATE OF STATUS DESIRED <input type="checkbox"/>				\$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	4 City / State / Zip
PD	YANG, SHU-JANE	5514 RIVER BOTTOM AVENUE	FRESNO CA 93722
SD	HE, XIUMIN	5514 RIVER BOTTOM AVENUE	FRESNO CA 93722

100024012961
 10/22/03--01043--012 **750.00

8. Name and Address of Current Registered Agent		9. Name and Address of New Registered Agent			
STEPHENSON & MOORE, INC 2753 STATE ROAD 580, SUITE #101 CLEARWATER FL 33761		Name			
		STEPHENSON & MOORE INC.			
		Street Address (P.O. Box Number is Not Acceptable)			
		706 TURNBULL AVE			
		Suite, Apt. #, Etc.			
		S-103			
		City		State	Zip Code
		ALTAMONTE SPRINGS		FL	32701

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. or 617.0505, F.S.

Signature of Registered Agent: Richard Moore REGISTERED AGENT MUST SIGN

Date: 10/16/03

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 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: RICHARD MOORE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 10/16/03

Daytime Phone #: 407 331 1372

CR2E040 (7/03)