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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # G89874

(3)

CANTON OF KINGS BAY CHINESE RESTAURANT, INC. **Ancipal Place of Business Mailing Address* 14487 S DIXIE HWY 6661 S. DIXIE HIGHWAY						
****** *** ******		MIAMI FL 33143				
				 Date Incorporated or Qualified 02/28/1984 	3a. Date of Last Report 03/22/1995	
. Principa! Pt]	ace of Business	2a. Mailing Address 26		4. FE! Number	Applied For	
Suite, Apt	#, etc.	Suite, Apt. #, etc.		59-2383018	Not Applicab \$8.75 Additional	
		27		5. Certificate of Status Desired	Fee Required	
Orty & State	9	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be	
Zip	Country	Zip	Country	This corporation has liability for	Added to Fees	
	[25]	29	30	Florida Statutes 🔀 Ye	s 🗌 No	
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Current	Hegistered Agent	81 Name	10. Name and Address of New	Registered Agent	
TOULY:	RICHARD-			ED WIEDER	(1.1.)	
	NE BUILDING, SUITE 907		oz street z	Address (P.O. Box Number is Not Accepta	A VE	
	T FLAGER STREET		83		,	
MAIMI F	L 33130		84 City	1	85 Zip Code	
i. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	ites, the above-named co	JOMESTEAD proporation submits this statement for the ou	FL 85 Zip Code 33030	
or register	ed agent, or both, in the State of Florid	 Such change was author 	ized by the corporation's	hoard of directors. I boroby appoint the one	pointment or registered goest. Les	
familiar wit	th, and accept the obligations of, Secto	on 607.0505, Florida Statute	S I	board or directors. Thereby accept the app	portunent as registered agent. Fami	
familiar w.t GNATUR€_	God Wiede			prooration submits this statement for the puboard of directors. Thereby accept the app	2-19-96	
GNATURE .	Syn Tim., types or product name of registered ago it a	and the day provable to	WIEDER IOTE: Registered Agent signature re	equired when reinstating)	2-19-96 DATE	
GNATURE .	God Wiede	and the day provable to		equired when reinstating)	2-19-96 DATE FICERS AND DIRECTORS IN 12	
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certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an edgess.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

SIGNING OF NOTE OF DIRECTOR

) -/19/9 6 3ar.

305-233-6224