

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

DOCUMENT # P0100045173

02 JUN -7 AM 9:26

1. Entity Name
EMPIRE BUFFET RESTAURANT CORP.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.
4300 W. Hwy 98
City & State
Panama City, FL
Zip
32401
County
Bay

Suite, Apt. #, etc.
4300 W. Hwy 98
City & State
Panama City, FL
Zip
32401
Country
Bay

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3720299
Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name
XUE YING PAN
Street Address (P.O. Box Number is Not Acceptable)
4300 W. Hwy 98
City
Panama City **FL** Zip Code
32401

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.

SIGNATURE Xue Ying Pan DATE 6/5/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>Director Xue Ying Pan 4300 W. Hwy 98 Panama City, FL 32401</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>Assistant Director Guo Yong Chen 4300 W. Hwy 98 Panama City, FL 32401</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>Assistant Director Guo Tan Chen 4300 W. Hwy 98 Panama City, FL 32401</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>ASSISTANT DIRECTOR Gui Yu Zhuo 4300 W. Hwy 98 Panama City, FL 32401</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>400005817244</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>-06/18/02--01068--008 ****158.75 ****158.75</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Xue Ying Pan Date 06-05-02 Daytime Phone # 850-913-1999
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2ED04B (12/01)