FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name

(6)

LAM'S GARDEN RESTAURANT, INC.

100 100

FILED

Feb 17 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address	5

Principal Place of Business	Mailing Address				<u> </u>
2505 EAST COLONIAL DRIVE 2505 EAST COLONIAL DRIVE					
ORLANDO FL 32803	25U5 EAST COL				
·		-		DO NOT WRITE IN 1	THIS SPACE
				3. Date Incorporated or Qualified	
2. Principal Place of Business	2a, Mailing Addr			04/01/1983 4. FEI Number	American Fr
21	26	C33		59-2295155	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$9.75 Additional
22	27			5. Certificate of Status Desired	Fee Required
City & State	City & State			6. Election Campaign Financing	\$5.00 May Be
23	28			Trust Fund Contribution	Added to Fees
Zip Count 24 25	· · · · · · · · · · · · · · · · · · ·	Country		8. This corporation owes or has paid th	
	29 ress of Current Registered Agent	30		Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No
MARK, CHUN WAH		81	Name	10, Traine and Addiese of Not Indiana	nou rigotti
- 1661-TREMONT LANE	39,9 0	· - 0= =			
WINTED DADK EL 9070		er CT 82	Street Addre	ess (P.O. Box Number is Not Acceptable)	
- WAR AND THE COURT	WINTER PARK.	FL 32792 83			
		84	City		FL 85 Zip Code
11. Pursuant to the provisions of Ser office or registered agent, or bo	ctions 607.0502 and 607.1508, Florid th, in the State of Florida. Such chan	la Statules, the above	named corp	oration submits this statement for the purpo ion's board of directors. I hereby accept the	see of changing its registered
agent. I am familiar with, and ac	coept the obligations of, Section 607.	5505, Florida Statutes			
SIGNATURE	me of registered agent and title if applicable	(NOTE Registered Agen	ol picos atura tagua	and whom on proteined	Alt
	OFFICERS AND DIRECTORS	13.	i agrade requie	ADDITIONS/CHANGES TO OFFICERS	
TITLE P	DE			TIPOTIONO/OF WINGLES TO OFF TOETIO	Change Addition
NAME MARK, CHU HAIN	NG	1.2 NAME			· -
STREET ADDRESS 2814 ILLINOIS ST		1.3 STREET /	ADDRESS		
CITY-ST-ZIP ORLANDO FL 32	803	1.4 CITY - ST	- Z IP		
TITLE ST	☐ DEI				☐ Change ☐ Addition
NAME MARK, CHU WAH		2.2 NAME			
STREET ADDRESS -1661-TREMONT-1	LANE 3919 Coolwat	er CT 2.3 STREET	ADDRESS		
CITY-ST-ZIP	L ORTOR WINTER PARK.F	L 32792 2.4 CITY-ST	f - ZIP		
TITLE VP	☐ DEI				Change Addition
NAME GANG-MAI, JUN		3.2 NAME			
STREET ADDRESS 1522 SUGERWOO		3.3 STREET A	NODRESS		
CITY-ST-ZIP WINTER PARK FL		3.4. CITY - \$1	I - ZIP		
TITLE	☐ D€I	LETE 4.1 TITLE			Change Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET A	DORESS		
CITY-ST-ZIP		4.4 CITY-ST	- ZIP		
TITLE	☐ DEL	LETE 5.1 TITLE			Change Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET A	IDDRESS		
CITY-ST-ZIP		5.4 CHY- ST-	-ZIP		
TITLE	L. DEL	LETE 6.1 TITLE			Change Addition
NAME .		62 NAME			
STREET ADDRESS					
DINEET ABBREOS		63 STREET A	address		

propriemental annual report is true and accurate and that my signature shall have the same logal effect as if made under oath; that I am an on or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in or or any attachment with an address.