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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

FILED

Feb 09, 1999 8:00am

Secretary of State

02-09-1999 90036 005 ***150.00

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 388193

Principal Place of Business

NEW FU MANCHU RESTAURANT CORP.

325-71 ST MIAMI BEACH FL 33141-3013			325-71 ST MIAMI BEAG	325-71 ST MIAMI BEACH FL 33141-3013					DO NOT WE	RITE IN THIS	SPACE			
								3. Date Incorpo 09/13/197		d				
2. Principal Place of Business			2a. Mailing	Address				4. FEI Number				Appli	ed For	65.3 17.3
_			26	-				59-136153	37			Not A	Applicable	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of	Status Desired				ditional	,
22	,		27					5. Certificate of	Sizius Desired	ب	Fe	e Requ	ired	
City & State	e			City & State				6. Election Cam	npaign Financing	,	\$5.	. 00 м	ay Be	
23			28	├ ¬ ′				Trust Fund C	Contribution		Adı	ded to	Fees	
Zip		Country	Zip					8. This corporat	tion owes the cu	ırrent year In		_		
24	25		29	29 30				Personal Pro	 		Yes		No	
	9. Name a	d Address of Cur	rent Registered A	gent		L.		10. Name and A	Address of New	Registered	Agent			ł
			* 3			81	Name						•	
4. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7.	oks, Philip					82	Street Addr	ress (P.O. Box Numl	ber is Not Acce	otable)				1
	LINCOLN RO					Ш.			1# (52 + \$48, 11)	. F & 2 × 4 × 17/2	ary 2 - 25 1	v 1945 - 1958		
MIAN	VII BEACH FL	33139				83			- SHIPPING					1
						84	City		3 * *! `&\#! x\#\		85	Zip Co	de	1
						1	•			<u> Fl</u>	_		· ·	l
			0500 1 007 4500					oration submits this	statement for th	ne purpose o	f changir	g its re	egistered	4
11. Pursuant	to the provision	is of Sections 607.0	0502 and 607.1508	i, Florida Statu	tes, the a	bove-	named corp	an's based of disorts	en I boroby acc	ant tha anno	intment :	ac romi	stered	
11. Pursuant office or n	manc barataina	t or both in the Sta	ate of Florida. Such	i chance was	4UUI OHZE	นบขแ	named corp he corporation	on's board of directo	ors. I hereby acc	ept the appo	intment a	as regis	stered	
office or n agent. I a	manc barataina	t or both in the Sta	ate of Florida. Such ligations of, Section	i chance was	4UUI OHZE	นบขแ	named corp he corporation	on's board of directo	ors. I hereby acc	ept the appo	intment a	as regis	stered	<u>.</u> [
office or n agent. I a	registered agen im familiar with	t, or both, in the Sta and accept the obi	ate of Florida. Such	607.0505, FI	orida Stat	tutes.	ne corporation	of when reinstating)		DATE				
office or n agent. I a	egistered agen im familiar with Signature, typed or	t, or both, in the Sta and accept the obl	ate of Florida. Such ligations of, Section	607.0505, FI	E: Registered	tutes.	ne corporation	od when reinstating) ADDITIONS/C	CHANGES TO C	DATE	ND DIRE	CTOR	S IN 12	100
office or n agent. I a	egistered agen m familiar with. Signature, typed or	t, or both, in the Sta and accept the obl	ate of Florida. Such ligations of, Section agent and title if applicable	607.0505, FI	orida Stat	tutes.	ne corporation	of when reinstating)	CHANGES TO C	DATE		CTOR		1000
office or nagent. I at	egistered agen rn familiar with Signature, typed or PD LI,JESUS	t, or both, in the Sta and accept the obl printed name of registered OFFICERS	ate of Florida. Such ligations of, Section agent and title if applicable	607.0505, FI	E: Registered	d Agent	ne corporation	od when reinstating) ADDITIONS/C	CHANGES TO C	DATE	ND DIRE	CTOR	S IN 12	
office or n agent. I al SIGNATURE 12.	egistered agen m familiar with. Signature, typed or	t, or both, in the Sta and accept the obl printed name of registered OFFICERS	ate of Florida. Such ligations of, Section agent and title if applicable	607.0505, FI	E: Registered	d Agent	ne corporation	od when reinstating) ADDITIONS/C	CHANGES TO C	DATE	ND DIRE	CTOR	S IN 12	
office or n agent. I al SIGNATURE 12. TITLE	egistered agen rn familiar with Signature, typed or PD LI,JESUS	t, or both, in the Sta and accept the obl printed name of registered OFFICERS	ate of Florida. Such ligations of, Section agent and title if applicable	607.0505, FI	E: Registered 13. 1.1 TI 1.2 N	d Agent	signature require	od when reinstating) ADDITIONS/C	CHANGES TO C	DATE	ND DIRE ☐ Cha	CTOR	S IN 12	
office or nagent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS	egistered agen im familiar with. Signature, typed or PD LI,JESUS 325 71ST	t, or both, in the Sta and accept the obl printed name of registered OFFICERS	ate of Florida. Such ligations of, Section agent and title if applicable	607.0505, FI	E: Registered 13. 1.1 TI 1.2 N	d Agent states.	signature require	od when reinstating) ADDITIONS/C	CHANGES TO C	DATE	ND DIRE	CTOR	S IN 12	
office or n agent. I al SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LI,JESUS 325 71ST S MIAMI FL	t, or both, in the Sta and accept the obl printed name of registered OFFICERS	ate of Florida. Such ligations of, Section agent and title if applicable	in charge was in 607.0505, FI	E: Registered 13. 1.1 TI 1.2 N 1.3 S 1.4 C	ITLE ITREET A	signature require	od when reinstating) ADDITIONS/C	CHANGES TO C	DATE	ND DIRE ☐ Cha	CTOR	S IN 12	
office or nagent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD LI,JESUS 325 71ST S MIAMI FL STD YEE, KAN	t, or both, in the Ste and accept the obl printed name of registered OFFICERS	ate of Florida. Such ligations of, Section agent and title if applicable	in charge was in 607.0505, FI	E: Registered 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N	Agent : Agent : Agent : TLE AME TREET A ITY-ST- ITLE	signature require	od when reinstating) ADDITIONS/C	CHANGES TO C	DATE	ND DIRE ☐ Cha	CTOR	S IN 12	
office or nagent. I all SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD LI, JESUS 325 71ST S MIAMI FL STD YEE, KAN 325 71ST S MIAMI FL	t, or both, in the Ste and accept the obl printed name of registered OFFICERS	ate of Florida. Such ligations of, Section agent and title if applicable	in GOT,0505, FI	E: Registerect 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S	Agent : Agent : Agent : TLE AME TREET A ITY-ST- ITLE	signature require ADDRESS ADDRESS	od when reinstating) ADDITIONS/C	CHANGES TO C	DATE	ND DIRE ☐ Cha	CTOR inge	S IN 12 Addition	
office or n agent. I al SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD LI, JESUS 325 71ST S MIAMI FL STD YEE, KAN 325 71ST S	t, or both, in the Ste and accept the obl printed name of registered OFFICERS	ate of Florida. Such ligations of, Section agent and title if applicable	in charge was in 607.0505, FI	E: Registerect 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S	ITLE IAME ITLE IAME ITLE ITLE ITLE ITLE ITLE ITLE ITLE ITL	signature require ADDRESS ADDRESS	od when reinstating) ADDITIONS/C	CHANGES TO C	DATE	ND DIRE ☐ Cha	CTOR inge	S IN 12	
office or n agent. I al SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LI, JESUS 325 71ST S MIAMI FL STD YEE, KAN 325 71ST S MIAMI FL	or both, in the Stand accept the obless of t	ate of Florida. Such ligations of, Section agent and title if applicable	in GOT,0505, FI	E: Registered 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C	ITLE AME TREET A	signature require ADDRESS ADDRESS	od when reinstating) ADDITIONS/C	CHANGES TO C	DATE	ND DIRE ☐ Cha	CTOR inge	S IN 12 Addition	
Office or magent. I all signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD LI,JESUS 325 71ST S MIAMI FL STD YEE, KAN 325 71ST S MIAMI FL VP	or both, in the Stand accept the obless of t	ate of Florida. Such ligations of, Section agent and title if applicable	in GOT,0505, FI	E: Registerock 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N	ITLE AME AME AME AME TREET A	signature require ADDRESS ADDRESS	od when reinstating) ADDITIONS/C	CHANGES TO C	DATE	ND DIRE ☐ Cha	CTOR inge	S IN 12 Addition	100 mm
office or magent. I all signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	PD LI,JESUS 325 71ST S MIAMI FL STD YEE, KAN 325 71ST S MIAMI FL VP LUCY, YEE	or point, in the Sit and accept the obless of the obless o	ate of Florida. Such ligations of, Section agent and title if applicable	DELETE	E: Registerect 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S	ITLE AME TREET A	ADDRESS -ZIP ADDRESS -ZIP ADDRESS	od when reinstating) ADDITIONS/C	CHANGES TO C	OATE DEFICERS A	ND DIRE Cha	inge ange	S IN 12 Addition Addition	000,750,700
Office or magent. I all signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	PD LI,JESUS 325 71ST S MIAMI FL STD YEE, KAN 325 71ST S MIAMI FL VP LUCY, YEE	or point, in the Sit and accept the obless of the obless o	ate of Florida. Such ligations of, Section agent and title if applicable	in GOT,0505, FI	E: Registerect 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S	I A Agent of	ADDRESS -ZIP ADDRESS -ZIP ADDRESS	od when reinstating) ADDITIONS/C	CHANGES TO C	OATE DEFICERS A	ND DIRE Cha	inge ange	S IN 12 Addition	
office or n agent. I al SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	PD LI,JESUS 325 71ST S MIAMI FL STD YEE, KAN 325 71ST S MIAMI FL VP LUCY, YEE	or noth, in the Stand accept the obless and accept the obless and accept the obless are of registered OFFICERS STREET KON STREET HC FL	ate of Florida. Such ligations of, Section agent and title if applicable	DELETE	E: Registerock 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T	I A Agent of	ADDRESS -ZIP ADDRESS -ZIP ADDRESS	od when reinstating) ADDITIONS/C	CHANGES TO C	OATE DEFICERS A	ND DIRE Cha	inge ange	S IN 12 Addition Addition	
office or n agent. I all signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE	PD LI,JESUS 325 71ST MIAMI FL STD YEE, KAN 325 71ST MIAMI FL VP LUCY, YEE 325 71ST MIAMI EBA T LI, VICTOR	or noth, in the Steam and accept the obless	ate of Florida. Such ligations of, Section agent and title if applicable	DELETE	E: Registerect 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 4 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 I	TITLE AME TITLE AME TITLE AME TITLE TITLE AME TITLE TIT	ADDRESS -ZIP ADDRESS -ZIP ADDRESS	od when reinstating) ADDITIONS/C	CHANGES TO C	OATE DEFICERS A	ND DIRE Cha	inge ange	S IN 12 Addition Addition	
office or n agent. I all signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME	PD LI,JESUS 325 71ST MIAMI FL STD YEE, KAN 325 71ST MIAMI FL VP LUCY, YEE 325 71ST MIAMI EBA T LI, VICTOR	ornted name of registered OFFICERS STREET CON STREET CON STREET A CON CON CON CON CON CON CON CON CON CO	ate of Florida. Such ligations of, Section agent and title if applicable	DELETE	E: Registerec 13. 1.1 Tl 1.2 N 1.3 S 1.4 C 2.1 Tl 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 I 4.3 S	TITLE AME TITLE AME TITLE AME TITLE TITLE AME TITLE TIT	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	od when reinstating) ADDITIONS/C	CHANGES TO C	OATE DEFICERS A	Cha	ange	S IN 12 Addition Addition Addition	
Office or magent. I all signature 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	PD LI, JESUS 325 71ST S MIAMI FL VP LUCY, YEE 325 71ST S MIAMI FL VP LUCY, YEE MIAMI EBA T LI, VICTOR 325 71ST S	ornted name of registered OFFICERS STREET CON STREET CON STREET A CON CON CON CON CON CON CON CON CON CO	ate of Florida. Such ligations of, Section agent and title if applicable	DELETE	E: Registerec 13. 1.1 Tl 1.2 N 1.3 S 1.4 C 2.1 Tl 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 I 4.3 S	TUTE AME TREET A AME TREET A AME TREET A	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	od when reinstating) ADDITIONS/C	CHANGES TO C	OATE DEFICERS A	ND DIRE Cha	ange	S IN 12 Addition Addition	
Office or magent. I all signature 12. Title NAME STREET ADDRESS CITY-ST-ZIP	PD LI, JESUS 325 71ST S MIAMI FL VP LUCY, YEE 325 71ST S MIAMI FL VP LUCY, YEE MIAMI EBA T LI, VICTOR 325 71ST S	ornted name of registered OFFICERS STREET CON STREET CON STREET A CON CON CON CON CON CON CON CON CON CO	ate of Florida. Such ligations of, Section agent and title if applicable	DELETE DELETE	E: Registerock 13. 1.1 TI 1.2 N 1.3 S 1.4 C 2.1 TI 2.2 N 2.3 S 2.4 C 3.1 T 3.2 N 3.3 S 3.4 C 4.1 T 4.2 N 4.3 S 4.4 C 5.1 T	TUTE AME TREET A AME TREET A AME TREET A	ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS -ZIP ADDRESS	od when reinstating) ADDITIONS/C	CHANGES TO C	OATE DEFICERS A	Cha	ange	S IN 12 Addition Addition Addition	

14. 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 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 address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

Change

Addition