

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 405739

(4)

1. Corporation Name

HONG KONG RESTAURANT, INC.



Principal Place of Business

Mailing Address

C/O STEPHEN K. TONG
614 S ATLANTIC AVE
ORMOND BEACH FL 32176-7716

C/O STEPHEN K. TONG
614 S ATLANTIC AVE
ORMOND BEACH FL 32176-7716

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

TONG, STEPHEN K.
614 S. ATLANTIC AVE.
ORMOND BCH FL 32074

3. Date Incorporated or Qualified

07/27/1972

3a. Date of Last Report

05/01/1995

4. FEI Number

59-1427298

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed in print name of registered agent and then in cursive

(If not, Registered Agent signature required after registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME VD
STREET ADDRESS TONG, STEPHEN
CITY-ST-ZIP 614 S ATLANTIC AVE
ORMOND BEACH, FL 00000

TITLE ☐ DELETE
NAME D
STREET ADDRESS MUI, KWOK KWONG
CITY-ST-ZIP 5772 BAY SHORE DR
SEMINOLE, FL 00000

TITLE ☐ DELETE
NAME D
STREET ADDRESS MUI, YIN LAM
CITY-ST-ZIP 16114 6TH ST
REDINGTON BCH, FL 00000

TITLE ☐ DELETE
NAME D
STREET ADDRESS MOY, ROBERT
CITY-ST-ZIP 5050 NORTH TRAIL
SARASOTA, FL 00000

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEPHEN TONG

5-30-96

804-672-6060

CR2E034 (12/95)