## 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 #

(3)

MING THE RESTAURANT INC

## **FILED** Feb 23 1998 8:00am Secretary of State

WING THE RESTAURANT, INC.						(12002.00	18 denia 2001 august 18 denia 20 denia	2121 21211 21011	BIBIC BIBIC BIBI	1 <b>6</b> (8)1 1001	
Principal Place of Business		Malling Address			1 100119 011	<b>46</b> 11111 4881 68111 68111 1	7121 G1211 G1011	81611 81811 8181	1 01011 1001		
4521 DEL PRADO BLVD.		4521 DEL PRADO BLVD.									
CAPE CORAL	FL 33904	CAPE CORAL FL 33904				DO NOT WRI	TE IN THIS	SPACE			
						3. Date Incor	porated or Qualified	<u></u>			
						09/14/19	979				
2. Principal Place of Business 2a. Mailing Address						4. FEI Numbe			[Ar	plied For	
21 5A	ME AS PIONE	26			59-193	3165		No	t Applicable		
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5 Certificate	of Status Desired		\$8.75			
22		27			<b>0</b> ,			Fee Re	<u> </u>		
City & Stat	e	City & State				4	ampaign Financing		\$5.00		
Zip	Country	Zip Country				Trust Fund Contribution Added to Fees					
<b>—</b>	25 29 30			, initia comporta				ation owes or has paid the current year Intangible operty Tax due June 30.			
24	g. Name and Address of Curren		30]			<del></del>	Address of New F				
<b>~</b>	······································			B1 Na	ame	10.					
CHUNG, PAU CHIN CHOU 1326 SE 21ST STREET						(D.O. D. 11)		-1.1.1			
CAPE CORAL FL 33904				82 Street Address (P.O. Box Number is Not Acceptable)							
<u>~</u>	TE COUNT IE 30304	•	ļ	83			<del> </del>				
			ļ	24 0					T_=  7:-	<u></u>	
				84 Cit	ly			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 regi									s registered		
office or registered agent, or both, in the State of Ftorida. 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 X											
010117110112	Signature, typed or printed name of registered ager		Registered	Agent sig	nature required	d when reinstating)		DATE			
12.	OFFICERS AND		13.		1	· · · · · · · · · · · · · · · · · · ·	CHANGES TO OFF		D DIRECTOR Change	S IN 12 Addition	
TITLE	V OUR BLOOM	☐ DELETÉ	1.1 TITLE		Pr	residen	+		Change	Li Modilion	
NAME	CHUNG, PAU CHIN		1.2 NAM								
STREET ADDRESS	1326 SE 21ST STREET CAPE CORAL FL			1.3 STREET ADDRESS							
CITY-ST-ZIP TITLE	D CAPE CONAL PL	DELETE		1.4 CITY-ST-ZIP 2.1 TITLE			<del></del>	<del></del>	☐ Change	Addition	
NAME -	•	CHUNG, GIP "JIMMY"		2.2 NAME							
STREET ADORESS	1326 SE 21ST STREET		2.3 STREET A		FSS						
CITY-ST-ZIP	CAPE CORAL FL			TY-ST-ZIP							
TITLE	D	<b>☑</b> DELETE		3.1 TITLE					Change	Addition	
NAME	HUANG, CHOU H.C.		3.2 NA	ME							
STREET ADORESS	4520 DEL PRADO BLVD		3.3 STI	3.3 STREET ADDRESS							
CITY-ST-ZIP	CAPE CORAL FL		3.4. Cf	TY-ST-ZIP							
TITLE	S	DELETE	4.1 TIT						☐ Change	Addition	
NAME '	CHOU, CHIN PIAO		4. 2 NA	ME							
STREET ADDRESS	4520 DEL PRADO BLVD		4.3 STI	reet aodr	ESS						
CITY-ST-ZIP	CAPE CORAL FL		4.4 CIT	Y-ST-ZIP							
TITLE	P	X DELETE	5.1 TIT	LE	X'i	CE VIBY	resident	المميا	☐ Change	Addition	
NAME .	KIRTLEY, HUNG TUAN		5.2 NA			un u	Jan 118 C	TICU	^		
STREET ADDRESS	1729 SE 44TH TERR			نما ا			1 Prado		ما		
CITY-ST-ZIP	CAPE CORAL FL			Y - ST - <i>Z</i> IP		SPE CO		!		KZ 4 2 691	
TITLE		☐ DELETE	6.1 T.T		्य १	easur	<b>CY</b>	~~~ ·	☐ Change	★ Addition	
NAME			6.2 NA		m	ichelle	Lin Ch				
STREET ADDRESS				reet addr	ESS   US	30 DEI	Prado B	71//- <b>7</b>	$\sim$		
CITY-ST-ZIP			6.4 CIT	Y-ST-ZIP		PE COI	CAI FO	YIOF	<u>~}</u>		

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.