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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F13031

(2)

HING'S RESTAURANT, INC.

NG, NGAI HEI

SIN, NGAN KIU

169 ALEATHA DR.

DAYTONA BEACH FL

149 POINT O WOOD DR.

DAYTONA BEACH FL

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAMÉ

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

Principal Place of Business Mailing Address 529 VOLUSIA AVENUE 529 VOLUSIA AVENUE DAYTONA BEACH FL 32114 DAYTONA BEACH FL 32			14						
					3. Date Incorporated or 01/01/1981	Qualified	3a. Date of 03/14/19		orl
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number				ed For
21		26			59-2094959		Not Applicable		
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.				. · [¬ \$8	.75 Add	
22		27			5. Certificate of Status [Jesired [` ,	Fee Requi	ired
City & Sta	te	City & State			Election Campaign F Trust Fund Contributi	~	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Cou	ntry	8. This corporation has	liability for inta		· · · · · · · · · · · · · · · · · · ·	
24					Florida Statutes Yes X No				
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address	of New Regis	stered Agent		
SIN, CHI KUEN 529 VOLUSIA AVE DAYTONA BEACH FL 32014				81 Name John Ng 82 Street Address (P.Q. Bax Number is Hot Acceptable) 5 2 9 W. Mernational Speedway 83 Blvd.					
11. Pursuant office or agent. I a	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the obt	502 and 607.1508, Florida Statut to of Florida Such change was a igaliops of, Section 607.0505, Flo	es, the at authorized orida Stat	pove-named cord by the corpora	poration submits this statement the statement of directors. I had	int for the purpreby accept t	pose of chan- he appointment	Zip Con 33 ging its re ent as reg	1/4-
SIGNATURE	Signature, typed or printed lia or of registered		F Registered	Agent signature requ	ried when reinstating)		DATE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES	TO OFFICER	RS AND DIRE	CTORS I	N 12
TITLE	P	DELETE	1.1 10	LE			CI	nange	Addition
NAME_	SIN, CHI KUEN		1.2 NA	ME					
STREET ADDRESS	145 POINT O WOOD DR.			REET ADDRESS					l l
CITY-ST-ZIP	DAYTONA BCH, FL 00000		1.4 CF	Y-SI-ZIP					
TITLE	V	DELETE	21111	LĒ			☐ C	iange _	Addition
NAME	SIN, SING KUEN		2.2 NA	ME					ł
STREET ADDRESS			2.3 \$1	REE1 ADDRESS					
CITY-ST-ZIP	DAYTONA BCH, FL 00000		2.401	TY-ST-ZIP					
TITLE	T	DELETE	3.1 1(1	LE			C	nange	Addition

City-St-ZiP

14. I do 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, prey an attachment with an address.

3.2 NAME

4.1 TITLE

4.2 NAME

51 TITLE

5 2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 City - S1 - ZIP

3.4 CITY-S1-ZIP

SIGNATURE: X: STONE DE LA COMPANIONE DE

6-11-97

904-423-0508

Change

Change

Change

Addition

Addition

Addition

FILED

Jun 18 1997 8:00am

Secretary of State