## 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 #

(0)

CHANG'S PEKING HOUSE, INC.

**FILED** 

Mar 04 1998 8:00am

Secretary of State

Principal Place of Business  1022 S.W. PINE AVE.  OCALA FL 34474 US			Mailing Address  1022 S.W. PINE AVE.  OCALA FL 34474 US				DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  05/12/1982			
2. Principal Place of Business			2a. Mailing Address				4. FEI Number	Applied For		
21			26				59-2193786	Not Applicable		
Suite, Apt. #, etc.		27	Suite, Apt. #, etc.				E Certificate of Status Desired S8.	75 Additional se Required		
City & State		28	City & State			· · · · · · · · · · · · · · · · · · ·	.00 May Be ided to Fees			
24		Country 29	Zip Co.		ntry	8. This corporation owes or has pald the current year Intangible Personal Property Tax due June 30.				
		Address of Current Reg	stered Agent		10. Name and Address of New Registered Agent					
CHANG, TIM C.					81	Name	lame			
					82	Street Address (P.O. Box Number is Not Acceptable)				
	OCALA FL 32870				83					
				ľ	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, typod or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE											
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	2							
TITLE	D DE	LETE 1.1 TITLE	Change A	ddition							
NAME	CHANG, PING SHEN	1.2 NAME									
STREET ADDRESS	1022 SW PINE AVENUE	1.3 STREET ADDR	ESS								
CITY-ST-ZIP	OCALA FL	1.4 CIŢY-ST-ZIP									
TITLE	VO DE	LETE 2.1 TITLE	☐ Change ☐ Ad	ddition							
NAME	CHANG, SHU-C.	2.2 NAME									
STREET ADDRESS	3230 SE 31ST STREET	2.3 STREET ADDR	ESS								
CITY-ST-ZIP	OCALA FL.	2. 4 C(TY - ST - ZIP									
TITLE	SM □ DE	LETE 3.1 TITLE	☐ Change ☐ Ad	ddition							
NAME	CHANG, C. L.	3.2 NAME									
STREET ADDRESS	3230 SE 31ST STREET	3.3 STREET ADOR	ESS								
CITY-ST-ZIP	OCALA FL	3.4. CITY - ST - ZIP									
TITLE	☐ DE	LETE 4.1 TITLE	Change A	ddition							
NAME		4. 2 NAME									
STREET ADDRESS		4.3 STREET ADDR	ESS								
CITY-ST-ZIP		4.4 CITY - ST - ZIP									
TITLE	DEI	LETE 5.1 TITLE	00000244754U	uddition							
NAME		5.2 NAME	-03/05/3801006028								
STREET ADDRESS		5.3 STREET ADDR	***150.00								
CITY-ST-ZIP		5.4 CITY - ST - ZIP									
TITLE	☐ DEI	LETE 6.1 TITLE	Change LA	ddition							
NAME		6.2 NAME	1 ⊃4								
STREET ADORESS		6.3 STREET ADDR									
		■	· (\1\1/2								

14. Thereby 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.

2/26-98