

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **G01157 (8)**
1. Corporation Name
CANTON CHINESE RESTAURANT OF CORAL GABLES, INC.



Principal Place of Business: 2614-2624 PONCE DE LEON BLVD CORAL GABLES FL 33134
Mailing Address: 2614-2624 PONCE DE LEON BLVD CORAL GABLES FL 33134

3. Date Incorporated or Qualified: 09/23/1982
3a. Date of Last Report: 04/10/1995
4. FEI Number: 59-2255158
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: 21
2a. Mailing Address: 26
22. Suite, Apt. #, etc.: 27
23. City & State: 28
24. Zip: 25
29. Country: 30

9. Name and Address of Current Registered Agent: LING, TONY, 18151 NE 31ST COURT, APT. #1816, CLIPPER BLDG., N. MIAMI BEACH FL 33160
10. Name and Address of New Registered Agent: 81 Name: Ed WIEDER, 82 Street Address: 325 N. KROME AVE, 84 City: HOMESTEAD, FL, 85 Zip Code: 33030

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: Ed Wieder, ED WIEDER, DATE: 4-6-96

12. OFFICERS AND DIRECTORS
1. TITLE: P, NAME: NG, ALLAN, STREET ADDRESS: 7390 S.W. 117TH TERRACE, MIAMI FL, CITY-ST-ZIP: MIAMI FL, DELETE
2. TITLE: ST, NAME: LING, TONY, STREET ADDRESS: 18151 NE 31ST COURT, APT. #1816 CLIPPER BD, CITY-ST-ZIP: N. MIAMI BEACH FL, DELETE
3. TITLE: DELETE
4. TITLE: DELETE
5. TITLE: DELETE
6. TITLE: DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1. TITLE: Change Addition
2. NAME: NG, ALLAN
3. STREET ADDRESS: 7227 S.W. 146 ST. CIRCLE, MIAMI, FL, 33156
4. CITY-ST-ZIP: MIAMI, FL, 33156
5. TITLE: Change Addition
6. NAME: NG, ALLAN
7. STREET ADDRESS: 7227 S.W. 146 ST. CIRCLE, MIAMI, FL, 33156
8. CITY-ST-ZIP: MIAMI, FL, 33156
9. TITLE: Change Addition
10. NAME: LING, TONY
11. STREET ADDRESS: 18151 NE 31ST COURT, APT. #1816 CLIPPER BD, CITY-ST-ZIP: N. MIAMI BEACH FL, 33160
12. TITLE: Change Addition
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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], SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: [Signature], DATE: 4/20/96, TELEPHONE NUMBER: (305) 884-6851

CR2E034 (12/95)