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PROFIT CORPORATION ANNUAL REPORT

1998



FI ORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

H89520

(1)

DYNASTY RESTAURANTS, INC.

Principal Place of Business	Mailing Address
11788 E. COLONIAL DR.	11786 E. COLONIAL DR.
ORLANDO FL 32817	ORLANDO FL 32917

FILED
May 19 1998 8:00am
Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/05/1985 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 59-2703707 Not Applicable Suite, Apt. #, etc. Sulte, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State Cily & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country  $Z_{\rm IP}$ Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 CHOU. HONG KUNG YAM, KWAN OO N. TRIPLET LAKE DRIVE Street Address (P.O. Box Number is Not Acceptable)
5669 REVELWOOD LOOP 82 OASSELBERRY FL-32707 83 Winter Par 84 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. au (NOTE: Registered Agent signature required when feinstating) ND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Change DELETE 1.1 TITLE TITLE YAM, KWAN 5669 Revelwood Loop -CHOU, HONG KUNG 1.2 NAME NAME -90 NO. TRIPLET LAKE DR 5669 Keveinson Winter Park, FL 32792 Ma Change 1.3 STREET ADDRESS STREET ADDRESS -CASSELBERRY FL-1.4 CITY - ST - ZIP CITY-ST-ZIP X DELETE TITLE 2.1 TITLE HO, CHE CHEONG 964 Wesson Drive Casselberry, FL 32707 -LEE; MINO O. 2.2 NAME NAME -- 674-VIGTAVILLA DR.-2.3 STREET ADDRESS STREET ADDRESS -WINTER SPRING FL 2. 4 CITY - ST - ZIP CITY - ST - ZIP DELETE 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY - ST - ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY - ST - 2IF Addition DELETE Channe TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 THUE TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS 6.4 CITY - ST-ZIP

14. Thereby certify that the information supplied with this filling 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 of 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:

wan fan YAM, KWAN

4/24/98 (407)281-1864