FILED FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State 1998 **DIVISION OF CORPORATIONS** DOCUMENT # (6)H90272 SING KONG CHINESE RESTAURANT, INC. Principal Place of Business Mailing Address 13422 U.S. 19 13422 U.S. 19 HUDSON FL 34667 HUDSON FL 34667 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/13/1985 2. Principal Place of Business 2a. Mailing Address FEI Number Applied For 21 26 59-8692239 Not Applicable Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes Yes 25 29 Personal Property Tax due June 30. 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 HUI. KWONG MOY Name 13616 MORNING COURT 82 Street Address (P.O. Box Number is Not Acceptable) **HUDSON FL 34667** 83 84 City 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** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable CR2E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Addition TITLE DELETE 1.1 THTLE Change HUI, KWONG MOY NAME 1.2 NAME 13616 MORNING COURT STREET ADDRESS 1.3 STREET ADDRESS **HUDSON FL** CITY-ST-ZIP 1.4 CITY-S1-ZIP DELETE Change Addition TITLE 2.1 TITLE HUI, VIVIAN Y. NAME 2.2 NAME **13616 MORNING COURT** STREET ADDRESS 2.3 STREET ADDRESS **HUDSON FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE VD ☐ Change ■ Addition TITLE 3.1 TITLE YUEN, CALVIN NAME 3.2 NAME **13616 MORNING COURT** STREET ADDRESS 33 STREET ADDRESS **HUDSON FL** CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 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 TITLE 61 TITLE NAME 62 NAME

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.

STREET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS

6.4 CITY - ST- ZIP