## 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 # J48373

(1)

JADE GARDEN RESTAURANT, INC.

F		A.A. Marian Bark San Caraca						
Principal Place of Business Mailing Address 235 NW 37TH AVE. 235 NW 37TH AVE.				( Address to a service from Albert and a service and a ser				
MIAMI FL 33125		MIAMI FL 33125-4827						
					3. Date Incorporated or Qualified   3a. Date of Last Report   12/18/1986   05/01/1996			aport
2. Principal Place of Business		2a. Mailing Address		4. FEI Number		<del></del>	plied For	
		26		<b>59-2812344</b> Not /		t Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 A		
City & State 3		Crly & State		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
7ip 1	Country 25	<b>Z</b> ip <b>29</b>	Count 30	ry	This corporation has liability to     Florida Statutes		e tay under s. No	199.032,
Id	9. Name and Address of Curi		17.71		10, Name and Address of New I	Registered	Agent	
SHE	N, YANG YI		8	1 Name				
235 (	NW 37TH AVE		Ē	2 Street Add	dress (P.O. Box Number is Not Accept	able)		
MIAN	II FL 33125			000(7,0)	21030 (1:0: 20x 110: 20x 10: 10: 10: 10: 10: 10: 10: 10: 10: 10:			
			[8	3		<u>-</u>		
			8	4 City		FL	85 Zip (	Code
11. Pursuant to office or a agent. Lar SIGNATURE	Mary yp si	ren			rporation submits this statement for the ation's board of directors. I hereby acc			s registered registered
40		agent and title if applicable (N AND DIRECTORS		geni signature req	uired when reinstating)  ADDITIONS/CHANGES TO OFF	DATE TOTOL	D DIDECTOR	C 14.12
12.	D OFFICERS A	DELETE	13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFF	ICERS AN	Change	Addition
AM:	MUK, MEI KEE CHRISTINE	better	1.2 NAM				C	
STREET ADDRESS	4914 SW 147 PLACE			ET ADDRESS				
DITY ST-ZIP	MIAMI FL		1.4 CITY					
PIR	PD	DELETE	2 1 7171.			-,	Change	Addition
VAME	SHEN, YANG YI		22 NAM	E			- •	
STIFFET ADDRESS	ANT AND ANTI- AUT		2 3 STRE	et address				
0-TYSTZiP	MIAMI FL		2. 4 CITY	r-ST-ZIP				
7. T. 7		DELETE	0.4.7.7.1				Change	Addition

14. I do hereby certily 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.

3.2 NAME

41 TITLE

4 2 NAME

5.1 TITLE

5.2 NAME

6 1 TITLE 6 2 NAME 6.3 STREET ADDRESS

DELETE

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3.3 STREET ADDRESS

4.3 STREET ADDRESS 4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

5.4 ČITY-ST-ZIP

6.4 CITY-ST-ZIP

3.4 CITY-ST-ZIP

SIGNATURE:

NAM

T. fef Name

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C-TY-ST ZiP

CHY-\$1-78\*

COTY-ST-74P

SIGNATURE OF TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

/18/47 305-6#9-4999 Date Dayline Phone # 0163885

Change

Change

Change

Addition

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Addition

**FILED** 

May 07 1997 8:00am

Secretary of State

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