

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 18, 2008 8:00 am
Secretary of State

02-18-2008 90013 009 ***150.00

DOCUMENT # K10795 1. Entity Name LOTUS CHINESE KITCHEN, INC.					
Principal Place of Business 1432-34 NE 26TH STREET FT. LAUDERDALE, FL 33305			Mailing Address 1432-34 NE 26TH STREET FT. LAUDERDALE, FL 33305		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent YEUNG, LAI Y 2825 NE 29TH STREET FORT LAUDERDALE, FL 33306				7. Name and Address of New Registered Agent Name <u>John Chao Yang</u> Street Address (P.O. Box Number is Not Acceptable) <u>3891 Coco Plum Circle</u> City <u>Coconut Creek</u> FL Zip Code <u>33063</u>	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>John Chao Yang</u> (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T YEUNG, SIU HAN 2318 NE 16 AVE WILTON MANORS, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P YEUNG, LAI YING 2825 NE 29TH STREET FORT LAUDERDALE, FL 33306	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V YEUNG, SIN NGAN 2318 NE 16 AVE WILTON MANORS, FL	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>John Chao Yang</u> 2/14/08 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

40026868



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4. FEI Number **65-0025460** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**