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Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # K47696

1. Corporation Name

Changchun Chinese Restaurant, Inc.

Principal Place of Business	Mailing Address
Changchun Chinese Restaurant, Inc. 4903 South U.S. #1 Ft. Pierce, FL 34982	-Same-

2. Principal Place of Business 21 4903 South U.S. #1	2a. Mailing Address 26 4903 South US #1	3. Date Incorporated or Qualified 11/28/88	3a. Date of Last Report 1997
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number	✓ Applied For Not Applicable
City & State 23 Ft. Pierce, FL.	City & State 28 Ft. Pierce, FL	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
Zip / Country 24 34982 / 25 St. Lucie	Zip / Country 29 34982 / 30 St. Lucie	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☑ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
To Chun Lee 1423 SE Grapeland Ave. Port St. Lucie, FL 34952	81 Name: Leung Tsoi 82 Street Address (P.O. Box Number is Not Acceptable): 4903 South U.S. #1 83 84 City: Ft. Pierce FL 85 Zip Code: 34982

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: Leung Tsoi — 8/29/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President X To Chun Lee 1423 SE Grapeland Ave. Port St. Lucie, FL 34952	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	President/Treasurer Leung Tsoi 2173 Sunflower Street Port St. Lucie, FL 34952	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Vice-President X Lam Hiu Lee 1423 SE Grapeland Ave. Port St. Lucie, FL 34952	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	Vice-President/Secretary Lai Kuen Tsoi 2173 Sunflower Street Port St. Lucie, FL 34952	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	17 9/17/97	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	600002298765 -09/22/97--01003--012 ***61.25	☐ Change ☐ Addition

CR2E034 (9/96)

14. I do hereby 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.

SIGNATURE: To Chun Lee — 8/29/97 — (561) 465-8622
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #