## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name K61217

(1)

THE CHOU'S, INC.

| Jan 26 1 | 998   | 8:00am   |
|----------|-------|----------|
| Secret   | ary ( | of State |
|          |       |          |

(941)746-7909

**FILED** 

| Principal Place of Business Mailing Address  902 9TH AVE W BRADENTON FL 34205  Mailing Address  902 9TH AVE W BRADENTON FL 34205 |  |                                   | /B1 01011 01911 01811 01811 91011 01011 1801 |               |   |  |
|--|--|-----------------------------------|--|---------------|---|--|
|  |  |                                   |  | ·             |   |  |
|  |  |                                   |  | DO NOT WRIT   | E IN THIS SPACE   |  |
| ŀ  |  |                                   |  |               | 3. Date Incorporated or Qualified   | THE THOUSE THE TENTE OF THE TEN |
|  |  |                                   |  |               | 01/18/1989  |  |
| _ `  | lace of Business                                   | 2a. Mailing Address               |  | •             | 4. FEI Number   | Applied For  |
| 21   |  | 26                                |  |               | 58-0186048  | Not Applicable   |
| Suite, Apt.  | #, <b>e</b> IC.                                    | Suite, Apt. #, etc.               |  |               | 5. Certificate of Status Desired  | \$8.75 Additional Fee Required   |
| City & State   | 9  | City & State                      |  |               | 6. Election Campaign Financing  | \$5.00 May Be  |
| 23   |  | 28                                |  |               | Trust Fund Contribution   | Added to Fees  |
| Zip  | Country  | Zip                               | Countr                                       | у             | 8. This corporation owes or has p   | aid the current year Intangible  |
| 24   | 25   | 29                                | 30   |               | Personal Property Tax due Jun   |  |
| <del></del>  | 8. Name and Address of Currer                      | nt Registered Agent               | 81   | Name          | 10. Name and Address of New R   | egistered Agent  |
|  | OU, CHHEANG CHEA                                   |                                   | [8]  | INATIO        |   |  |
|  | 2 9TH AVE W<br>ADENTON FL 34205                    |                                   | 82   | Street        | Address (P.O. Box Number is Not Accepta   | ble)   |
| ) DIV  | ADENION FL 34205                                   |                                   | 83   | ļ             |   |  |
|  |  |                                   |  |               |   | [as ] 3: 0   |
|  |  |                                   | 84   | City          |   | FL 85 Zip Code   |
| 11. Pursuant   | to the provisions of Sections 607.050              | 02 and 607.1508, Florida Statut   | es, the abov                                 | e-named       | corporation submits this statement for the poration's board of directors. I hereby acce | purpose of changing its registered   |
| agent. I a   | m familiar with, and accept the oblig              | nations of, Section 607.0505, Flo | orida Statute                                | S.            | oralion's board or directors. Thereby acce  | pt the appointment as registered   |
| SIGNATURE  |  |                                   |  |               |   |  |
| 12.  | Signature, typed or printed name of registered ag- | ent and title if applicable (NOTI | E: Registered Ag                             | ent signature | required when reinstating)  ADDITIONS/CHANGES TO OFFI                                   | CERS AND DIRECTORS IN 12   |
| TITLE  | PTD  | DELETE                            | 1.1 TITLE                                    |               | ADDITIONS/OFFANGED TO OFF   | Change Addition  |
| NAME   | CHOU, CHHEANG CHEA                                 |                                   | 1.2 NAME                                     | - 1           |   |  |
| STREET ADDRESS   | 902 9TH AVE W                                      |                                   | 1.3 STREE                                    | r address     |   |  |
| CITY-ST-ZIP  | BRADENTON FL                                       |                                   | 1.4 C(TY-                                    | ST-ZIP        |   |  |
| TITLE  | VPSD   | DELETE                            | 2.1 TITLE                                    |               |   | Change Addition  |
| NAME   | CHOV, Y KANG                                       |                                   | 2.2 NAME                                     |               |   |  |
| STREET ADDRESS   | 902 9TH AVE W                                      |                                   | 2.3 \$1REE                                   | ADDRESS       |   |  |
| CITY-ST-ZIP  | BRADENTON FL                                       | ☐ DELETE                          | 2. 4 CITY -                                  | ST-ZIP        |   | Change Addition  |
| TITLE  |  | [_] Deter                         | 3.1 TITLE                                    |               |   | Change Adollion  |
| NAME<br>STREET ADDRESS   |  |                                   | 3.2 NAME                                     | ADDRESS       |   |  |
| CITY-ST-ZIP  |  |                                   | 3.4. CITY-                                   |               |   |  |
| TITLE  |  | DELETE                            | 4.1 TITLE                                    | 31 211        |   | Change Addition  |
| NAME   |  |                                   | 4. 2 NAME                                    |               |   |  |
| STREET ADDRESS   |  |                                   | 4.3 STREE                                    | ADDRESS       |   | J  |
| CITY-ST-ZIP  |  |                                   | 4.4 CITY-S                                   | ŀ             |   |  |
| TITLE  |  | DELETE                            | 5.1 TITLE                                    |               |   | Change Addition  |
| NAME   |  |                                   | 5.2 NAME                                     |               |   |  |
| STREET ADDRESS   |  |                                   | 5.3 STREE                                    | ADDRESS       |   |  |
| CITY-ST-ZIP  |  |                                   | 5.4 CITY - S                                 | ST-ZIP        |   |  |
| TITLE  |  | ☐ DELETE                          | 6.1 TITLE                                    |               |   | Change Addition  |
| NAME   |  |                                   | 6.2 NAME                                     | 1             |   |  |
| STREET ADDRESS   |  |                                   | 6 3 STREE                                    | ADDRESS       |   |  |

14. I 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.