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

FILED Mar 13 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # L14747 (4) SHUN LEE RESTAURANT, INC. Principal Place of Business Mailing Address 805 W. SAMPLE ROAD 805 W. SAMPLE ROAD POMPANO BEACH FL 33064 POMPANO BEACH FL 33064 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/11/1989 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 .65-0151929 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Zip Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 29 12 Yes 25 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CHAN, FONG SHUN 805 WEST SAMPLE ROAD Street Address (P.O. Box Number is Not Acceptable) 82 POMPANO BEACH FL 33064 83 City Zip Code 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 Signature, typed or prodest name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1.1 THILE NAME CHAN, FONG SHUN 1.2 NAME STREET ADDRESS 805 W. SAMPLE ROAD 1.3 STREET ADDRESS POMPANO BEACH FL 33064 CITY-ST-ZIP 1.4 CITY+ST-ZIP DELETE Change Addition TITLE 2.1 TITLE TSE, BO UN NAME 2.2 NAME 805 W. SAMPLE ROAD STREET ADDRESS 2 3 STREET ADDRESS POMPANO BEACH FL 33064 CITY-ST-ZIP 2 4 CHTY-ST-ZIP ☐ DELETE Change Addition TITLE 31 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 3.4. CITY-ST-ZIP TIFLE DELETE 4.1 TITLE Change Addition 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELFTE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

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 change it, or my in attachment with an address.

5.4 CITY-ST-ZIP

6 3 STREET ADDRESS 6 4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

Change

Addition