

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED
FILED

95 MAY 1 11 0:16

SECRET
TREASURY DEPARTMENT

DOCUMENT # M54422 (4)

1. Corporation Name

GOLDEN DRAGON CHINESE RESTAURANT, INC.

Principal Place of Business

**2905 HAMPTON CIR EAST
DELRAY BEACH FL 33445
US**

Mailing Address

**2905 HAMPTON CIR EAST
DELRAY BEACH FL 33445
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/24/1987

3a. Date of Last Report

04/20/1994

4. FEI Number

65-0073177

Applied For

Not Applicable

5. Certificate of Status Desired

☐ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for interest on tax under § 193.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

2a. Mailing Address

25

Suite, Apt. #, etc.

26

City & State

27

Zip

28

Country

29

Country

30

9. Name and Address of Current Registered Agent

**CHAO, MINGCHIH
2905 HAMPTON CIR EAST
DELRAY BEACH FL 33445**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 Sections 607.0405, Florida Statutes.

SIGNATURE

Signature of Registered Agent (Print Name and Title)

Signature of New Registered Agent (Print Name and Title)

12. OFFICERS AND DIRECTORS

1. TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

**D
LING, LEE HSI
14114 ASTER AVE
WELLINGTON FL**

2. TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

**D
MINGCHIH, CHAO
2905 HAMPTON CIR EAST
DELRAY BEACH FL**

3. TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

**D
LING, SHOU-HUNG
14114 ASTER AVE
WELLINGTON FL**

4. TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

5. TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

6. TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

7. TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

☐ Change ☐ Addition

2. TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

☐ Change ☐ Addition

3. TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

☐ Change ☐ Addition

4. TITLE

NAME

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CITY, ST., ZIP

☐ Change ☐ Addition

5. TITLE

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☐ Change ☐ Addition

6. TITLE

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CITY, ST., ZIP

☐ Change ☐ Addition

7. TITLE

NAME

STREET ADDRESS

CITY, ST., ZIP

☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.02(2)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mingchih Chao

4-22-95

Date

Signature of Agent