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PROFIT CORPORATION ANNUAL REPORT

1996

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

DOCUMENT # **M87777** **(2)**

1. Corporation Name

SHANGRI-LA CHINESE RESTAURANT, INC.

Principal Place of Business	Mailing Address
EMPRESS GARDEN 6080 N. LOCKWOOD RIDGE SARASOTA FL 34243 US	~~W. WEN-MAN WHITE~~ ~~2515 W. BURR OAK COURT~~ ~~SARASOTA FL 34232~~

2. Principal Place of Business	2a. Mailing Address
21	26 c/o L. Scott Rattana
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27 4711 Elfrida Avenue
City & State 23	City & State 28 Sarasota, FL 34235
Zip 24 / Country 25	Zip 29 / Country 30

3. Date Incorporated or Qualified: 06/21/1988
3a. Date of Last Report: 07/14/1995

4. FEI Number: 65-0059638 ☐ 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 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
~~WHITE, PAUL A.~~ ~~2515 W. BURR OAK COURT~~ ~~SARASOTA FL 34232~~	81 Name: L. Scott Rattana 82 Street Address (P.O. Box Number is Not Acceptable): 4711 Elfrida Avenue 83 84 City: Sarasota FL 85 Zip Code: 34235

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: L. Scott Rattana, Pres. DATE
(Signature, typed or printed name of registered agent and title if applicable) (Both Registered Agent Signature required when restating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~P~~ ~~WHITE, WEN-MAN~~ ~~2515 W. BURR OAK CT.~~ ~~SARASOTA FL~~	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	Pres. & Treas. Rattana, L. Scott 4711 Elfrida Avenue Sarasota, FL 34235	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VP~~ ~~WHITE, PAUL A.~~ ~~2515 W. BURR OAK CT.~~ ~~SARASOTA FL~~	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	Vice-Pres. & Sec. Rattana, Bounthavy 4711 Elfrida Avenue Sarasota, FL 34235	☐ 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		☐ 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		☐ Change ☐ Addition

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 added by an attachment with an address.

SIGNATURE: 1-25-96 (941) 359-3658
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone #
L. Scott Rattana, Pres.