

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 13, 2002 8:00 am
Secretary of State

02-13-2002 90113 047 ***150.00

DOCUMENT # P00000011475

1. Entity Name

ZHANG'S FAMILY NEW CHINA BUFFET, INC.

Principal Place of Business

**8369 PINES BLVD
PEMBROKE PINES FL 33024**

Mailing Address

**8369 PINES BLVD
PEMBROKE PINES FL 33024**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3627082

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**ZHANG, YU JIN
5841 LAKE WORTH ROAD
GREENACRES FL 33463**

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **ZHANG, RONG**
STREET ADDRESS **1470 E HALLANDALE BEACH BLVD.**
CITY-ST-ZIP **HALLANDALE FL 33009**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VP** ☐ Delete
NAME **ZHANG, YU JIN**
STREET ADDRESS **1710 N WICKHAM ROAD**
CITY-ST-ZIP **MELBOURNE FL 32935**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SO** ☐ Delete
NAME **ZHANG, YU JIN**
STREET ADDRESS **5841 LAKE WORTH ROAD**
CITY-ST-ZIP **GREENACRES FL 33463**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address with another like empowered.

SIGNATURE:

RONG ZHANG
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)

Attachment #1000000011475
中美保险税务公司 734835

ONE EAST BROADWAY 3RD FL NEW YORK N.Y 10038

华埠东百老汇
一号三楼

电话: (212) 566-0351
传真: (212) 566-0446

客户: Zhang's Family

日期: _____

档案号码: () _____

生意税: _____

支票抬头请写

工人税: _____

DEPT OF STATE

失业金税: _____

牌照费: _____

请在税单上打(X)的地方签名

个人财产税: _____

并在支票上填上你的报税号码

其他: 公司 # 150

100000011475

请用本公司所提供的信封在 _____ 日之前寄去税务局