




**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000011964		
1. Entity Name CHANG'S GROUP, INC.		
Principal Place of Business 318 SARASOTA QUAY SARASOTA, FL 34236	Mailing Address 318 SARASOTA QUAY SARASOTA, FL 34236	
DO NOT WRITE IN THIS SPACE		
		 03162005 No Chg-P CR2E034 (10/03)
		4. FEI Number 65-0981568 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent CHANG, TONY 318 SARASOTA QUAY SARASOTA, FL 34236		
		DO NOT WRITE IN THIS SPACE
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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) <small>Signature, typed or printed name of registered agent and title (if applicable).</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHANG, TONY 2374 TURNBERRY COURT NAPLES, FL 34109	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIN, GEORGE H. S 18 GLASTONBURG PL. LAGUNA NIGUEL, CA 92677	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CHANG, LI 2374 TURNBERRY COURT NAPLES, FL 34109	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHANG, HSIN T 2374 TURNBERRY COURT NAPLES, FL 34109	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE:  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> Date _____ Daytime Phone # _____		