


2008 FOR PROFIT CORPORATION ANNUAL REPORT

06-16-2008 90001 032 ***150.00
P00000028816

FILED

08 JUL -9 AM 8:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P00000028816					
1. Entity Name Z.J. NEW CHINA BUFFET, INC.					
Principal Place of Business 1470 E. HALLANDALE BEACH BLVD. HALLANDALE, FL 33009			Mailing Address 1 EAST BROADWAY 3RD FLOOR NEW YORK, NY 10038		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent HANCOCK, WEI HONG 1470 E. HALLANDALE BEACH BLVD. HALLANDALE, FL 33009				7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remaining)</small> DATE _____					
FILE NOW!!! FEE IS \$550.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	HANCOCK, WEI H		NAME		
STREET ADDRESS	1470 E HALLANDALE BCH BLVD		STREET ADDRESS		
CITY-ST-ZIP	HALLANDALE, FL 33009		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ZHANG, YU JIN		NAME		
STREET ADDRESS	5841 LAKE WORTH RD		STREET ADDRESS		
CITY-ST-ZIP	LAKE WORTH, FL 33463		CITY-ST-ZIP		
TITLE	O	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ZHANG, RONG		NAME		
STREET ADDRESS	1470 E HALLANDALE BCH BLVD		STREET ADDRESS		
CITY-ST-ZIP	HALLANDALE, FL 33009		CITY-ST-ZIP		
TITLE	O	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	ZHANG, GE QING		NAME		
STREET ADDRESS	8369 PINES BLVD		STREET ADDRESS		
CITY-ST-ZIP	HOLLYWOOD, FL 33021		CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u>Wei Hong Hancock</u> / <u>PRESIDENT</u>			Date: <u>954-458-0062</u>		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>DATE</small>		

7/10/08