

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 18, 2004 8:00 am**  
**Secretary of State**

02-18-2004 90005 041 \*\*\*150.00

**DOCUMENT # P01000001216**

1. Entity Name

**MING TONG CHINESE RESTAURANT INC.**



Principal Place of Business

**1775 US 27 SOUTH  
SEBRING FL 33870**

Mailing Address

**1775 US 27 SOUTH  
SEBRING FL 33870**

2. Principal Place of Business

3. Mailing Address

**1775 US 27 South**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

**Sebring, FL**

Zip

Country

Zip

Country

**33870**

4. FEI Number

**65-1065569**

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

**WEN, MING T  
4602 STATE RD 64 EAST  
BRADENTON FL 34208**

Name

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

**1775 US 27 South**

City

**Sebring**

**FL**

Zip Code

**33870**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2004 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete  
NAME **WEN, MING T**  
STREET ADDRESS **4602 STATE RD 64 E**  
CITY-ST-ZIP **BRADENTON FL 34208**

TITLE ☒ Change ☐ Addition  
NAME **1775 US 27 South**  
STREET ADDRESS **Sebring, FL 33870**  
CITY-ST-ZIP **Sebring, FL 33870**

TITLE ☐ Delete  
NAME **WEN, MING T**  
STREET ADDRESS **4602 STATE RD 64 E**  
CITY-ST-ZIP **BRADENTON FL 34208**

TITLE ☒ Change ☐ Addition  
NAME **1775 US 27 South**  
STREET ADDRESS **Sebring, FL 33870**  
CITY-ST-ZIP **Sebring, FL 33870**

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CITY-ST-ZIP

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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)(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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

**x 2/12/04**