


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 08, 2007 8:00 am
Secretary of State

05-08-2007 90019 026 ***163.75

DOCUMENT # P01000033015 1. Entity Name GOLDEN PALACE SUSHI, INC.	
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Principal Place of Business 1863 WELLS RD., #169 ORANGE PARK, FL 32073	Mailing Address 1863 WELLS RD., #169 ORANGE PARK, FL 32073
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40108475



04262007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3705593	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent AUNG, THEIN H 1863 WELLS RD., #130 ORANGE PARK, FL 32073 AUNG THEIN H 9466 Woodleigh Mill Dr Jacksonville FL 32244
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**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 <u><i>[Signature]</i></u> (NOTE: Registered Agent signature required when reinstating) DATE <u>7/26/07</u>
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FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input checked="" type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD AUNG, THEIN H 1863 WELLS RD., #130 ORANGE PARK, FL 32073
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD AUNG THEIN H 9466 Woodleigh Mill Dr Jacksonville FL 32244
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**DO NOT WRITE
IN THIS SPACE**

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><i>[Signature]</i></u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date <u>7/26/07</u> Daytime Phone # <u>904-334-8051</u>