2005 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT DOCUMENT # P01000060167

1. Entity Name
HTAY FAMILY SUSHI ENTERPRISES, INC.

Principal Place of Business

SUSHIBAR - CORAL SPRINGS 5950 CORAL RIDDE DR CORAL SPRINGS, FL 33076 Mailing Address

2710 NW 115 TER CORAL SPRINGS, FL 33065

FILED Apr 27, 2005 8:00 am Secretary of State

04-27-2005 90312 003 ***150.00

40069082



04202005

No Chg-P

CR2E034 (10/03)

4. FEI Number Applied For S9-3723598 Not Applied For Not Applicable

5. Certificate of Status Desired S8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

HTAY, MYINT 2710 NW 115 TER CORAL SPRINGS, FL 33065

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 familier with, and accept the obligations of registered agent.						
SIGNATURE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financia Trust Fund Contribution.			cing	\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HTAY, MYINT 11584 NW 44TH ST. CORAL SPRINGS, FL 33065					
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE			
TITLE NAME Street address City-St-2:P						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CHY-SI-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)(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.						

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THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DI