2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2004 8:00 am Secretary of State

DOCUMENT # P01000070354 1. Entity Name SZECHUAN PALACE, INC.				04-28-2004 90241 027 ***150.00		
5897		Mailing Address 3689 NEWPORT AVE BOYNTON BEACH, FI S TE 8 58 T Atte M 3. Mailing Address	\$ military T	RL STE 8		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		04232004 Chg-P	CR2E034 (10/03)	
City & State	Э	City & State		4. FEI Number 65-1121511	Applied Not App	d For plicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	CR 75 Additions	
	6. Name and Address of Curre N BORT AVE: 1 BEACH, FL 33436 S Military TA	nt Registered Agent Ly Address Ch LL STE 8 L63	Name Street Addres	7. Name and Address of New s (P.O. Box Number is Not Accepta		
the obligations of the obligation of the obligat	named entity submits this statement ons of registere majerit. Signature, typed or britted name of registered ago to the statement of the stat	ent and title if applicable. (N	IOTE: Registered Agent signature requipations		4/25/4 OATE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	Delete 5891 S Military	11. TITLE TIC NAME STE 8 STREET ADDRESS 22 LPITY-ST-ZIP	ADDITIONS/CHANGES TO C	OFFICERS AND DIRECTORS IN Change	11 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Addition
indicated	pertify that the information supplied won this report or supplemental report or supplemental report poration or the receiver or trustee error on an attachment with puraddress	rt is true and accurate and tha	at my signature shall have th	ne same legat effect as if made und	er oath: that I am an officer or di	irector
SIGINAL	SIGNATURE AND TYPED O	OR PRINTED NAME OF SIGNING OFFICE	ER OR DIRECTOR	Date	Daytime Phone #	