2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#

P01000106466

1. Entity Name

GOLDEN CHINA BUFFET INC.



FILED Sep 10, 2003 8:00 am Secretary of State

09-10-2003 90061 044 ***550.00

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,	e of Business		g Address								
NORTH SIDE SHOPPING CENTER			•	C/O HUNG TO BOWERY							
7900 NW 27TH AVENUE. 200 NORTH COURT				LOWER LEVEL. ROOM 29							
MIAMI FL 331	147		NEW	YORK NY 10013							
2. Principal Place of Business				3. Mailing Address			,"	OBS III OQSDI ISDIS QQISI	88411 48 181 14841 8	ATIM AFILE DIRER	Afjin blit indt
				70 BOWERY, LOWER LEVEL			<u> </u>	•			
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc. '			☐ CHECK HERE IF MAKING CHANGES				
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Žip		Country	Zip	10013	Count	YORK	5. Certificate	of Status Desired		\$8.75 Add Fee Require	
	6. Name	and Address of Curre	nt Registere	d'Agent		and parties -	7. 7. Name and	Address of New	Registered A	gent	-
					}	Name					
GUO, QI				ŀ	Street Address	(P.O. Box Numb	er is Not Acceptab	le)			
NORTH SIDE SHOPPING CENTER 7900 NW 27TH AVENUE, 200 NORTH COUR					ļ		· · · · · · · · · · · · · · · · · · ·				
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MIAMI FL	. 33147	:				City			FL	Zip Cod	Э
	named entity	submits this statement	for the purpo	ose of changing its	s registere	d office or registe	ered agent, or bo	th, in the State of F	lorida. I am f	amiliar with,	and accept
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SIGNATURE .		<u> </u>									
<u></u>	Signature, typed o	r printed name of registered age	ent and title if appl	iicable. (NOT	iE: Registered	Agent signature require	ed when reinstating)		DATE		
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		2003 Fee will be \$75					II	ecton Campaign r ust Fund Contributi	· ·		O May Be to Fees
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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 REQUIRED

Date

Daytime Phone #