2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P02000095564

1. Entity Name

PANDA CHINA BUFFET INC.



Jan 27, 2006 08:00 AN Secretary of State

Principal Place of Business

830 E GREGORY ST PENSACOLA, FL 32501 Mailing Address

830 E GREGORY ST PENSACOLA, FL 32501



DO NOT WRITE IN THIS SPACE

01162006 No Chg-P CR2E034 (11/05)

4. FEI Number 52-2379285

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZHENG, SHUN Z 830 E GREGORY ST PENSACOLA, FL 32501

## DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the plons of registered agent.	urpose of changing its registere	ed office or r	egistered agent, or bo	oth, in the State of Florida. I am familia	with, and accept
SIGNATURE	Signature, typed or printed name of registered egent and title if	applicable (NOTE: Registered	d Agent signature	required when reinstating)	DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finan     Trust Fund Contribution.	icing	\$5.00 May Be Added to Fees	U00000402463 02/03/06-80009-006	150.00
10.	OFFICERS AND DIREC	TORS		_		
TITLE MAME STREET ADDRESS CITY-SI-ZIP	DPVS ZHENG, SHUN Z 830 E GREGORY ST PENSACOLA, FL 32501					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ZHENG, SHUN Z 830 E GREGORY ST PENSACOLA, FL 32501					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				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

TITLE

STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

16/06

Daytime Phone #