2006 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P03000045508

1. Entity Name
ASIAN HOUSE RESTAURANT, INC.

Principal Place of Business	Mailing Address
407 CHENEY HWY TITUSVILLE, FL 32780	407 CHENEY HWY TITUSVILLE, FL 32780

DO NOT WRITE IN THIS SPACE

04142006   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
13-4248007	Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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6. Name and Address of Current Registered Agent

FENG, YI HUANG
407 CHENEY HWY
TITUSVILLE, FL 32780

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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 ___X_____   4/26/-6
Signature, typed or printed name of registered agent and title if applicable.   (NOTE Registered Agent signature required when reinstating)   DATE

U000005310S1

05/06/06--80024-013 150.00

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

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10.   OFFICERS AND DIRECTORS

TITLE	PT
NAME	FENG, YI HUANG
STREET ADDRESS	407 CHENEY HWY
CITY-ST-ZIP	TITUSVILLE, FL 32780

TITLE	VS
NAME	BI LING, CHAN
STREET ADDRESS	407 CHENEY HWY
CITY-ST-ZIP	TITUSVILLE, FL 32780

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: ___X_____   4/26/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #