

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 02, 2005 8:00 am
Secretary of State

06-02-2005 90001 008 ***150.00

DOCUMENT # P03000132063

1. Entity Name
**SAINT CLOUD PLUM TREE CHINESE RESTAURANT,
INCORPORATED**



Principal Place of Business
**3306 CANOE CREEK
UNIT F
ST CLOUD, FL 32769**

Mailing Address
**3306 CANOE CREEK
UNIT F
ST CLOUD, FL 32769**

50053193



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

05282005 Chg-P CR2E034 (10/03)

4. FEI Number **20-0388503** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**LIANG, BRIAN
832 N THORNTON AVENUE
ORLANDO, FL 32803**

7. Name and Address of New Registered Agent
Name **FUN LAM**
Street Address (P.O. Box Number is Not Acceptable)
3306 CANOE CREEK, UNIT F
City **St. Cloud** FL Zip Code **34772**

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 **FUN LAM**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

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

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NI, MAO SHENG 3306 CANOE CREEK, UNIT F ST CLOUD, FL 32769 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD LAM, FUN 3306 CANOE CREEK, # F ST. CLOUD, FL 34772 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TSD LIN, BI FANG 3306 CANOE CREEK, UNIT F ST CLOUD, FL 34769 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NI, MAO SHENG 3306 CANOE CREEK, # F ST. CLOUD, FL 34772 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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: **NI, MAO SHENG** 5-28-05 407-891-3688
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #