## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 12, 2007 08:00 AM Secretary of State

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DOCUMENT # P03000138229  1. Entity Name #1 INTERNATIONAL SUPER BUFFET, INC.				Secretary of Stat
Principal Place 2200 TAMIAN PORT CHARL		Mailing Address 2200 TAMIAMI TRAIL PORT CHARLOTTE, FL 33948	US	
DO NOT WRITE IN THIS SPAC			CE	01122007 No Chg-P CR2E034 (11/05)  4. FEI Number Applied For 20-0421982 Not Applicable  5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Name and Aduress of Current Registered Agent				and the second state of the second se
LEE, SHAOLI 2200 TAMIAMI TRAIL PORT CHARLOTTE, FL 33948				DO NOT WRITE IN THIS SPACE
	named entity submits this statement for the ions of registered agent.	e purpose of changing its register	ed office or registe	red agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and	title if applicable (NOTE: Registers	ed Agent signature requires	d when reinstating) DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finant Trust Fund Contribution.				0.00 May Be died to Fees
10.	OFFICERS AND DI	RECTORS	, e + <sub>S</sub>	Al .
NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	P WANG, GUANG ZU 2200 TAMIAMI TRAIL PORT CHARLOTTE, FL 33948			U00000633992 02/21/07-80094-024 150.00
CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			* 4	IN THIS SPACE
NAME STREET ADDRESS CITY-S1-ZIP				and the second of the second o
TITLE NAME			1 .	

12. I hereby certify that the information supplied with this filling 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

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED GRAPHINTED HAME OF SIGNING OFFICER ON DIRECTOR

02/05/07

Daytime Phone #