2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Mar 07, 2007 8:00 am Secretary of State **DOCUMENT # P04000090335** 03-07-2007 90009 015 ***150 00 CHENG'S RESTAURANT OF KEY LARGO CORP. Principal Place of Business Mailing Address 4UUJUV-101443 POERSEMS HWY 18999 BISCAYNE BLVD STE 205 KEY LARGO, FL 33037 AVENTURA FL 33180 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01092007 Chg-P CR2E034 (12/06) Applied For City & State City & State 4. FEI Number 20-1239323 Not Applicable Country Zφ Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHENG, WAI 128 LORELANE PLACE Street Address (P.O. Box Number is Not Acceptable) KEY LARGO, FL 33037 City 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 Signature, hipped or printed name of regularized against and fairs it implicables (NOTE: Registered Agent argneture required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Added to Fees Trust Fund Contribution. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11 PD TITLE Change ☐ Addition ☐ Delete TITLE CHENG, WAI MALE 128 LORELANE PLACE STREET ADDRESS STREET ADDRESS KEY LARGO, FL 33037 CITY-SI-7P CITY-ST-7P SD ☐ Change Delete TITLE Addition TITLE CHENG, CHUNG 128 LORELANE PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZP KEY LARGO, FL 33037 CITY-SI-ZIP Delete TITLE Change ☐ Addition TATLE XU. JING XILI NAME NAME 101443 OVERSEAS HWY STREET ADDRESS STREET ADDRESS KEY LARGO, FL 33037 CITY - ST - ZIP CITY-ST-DP ☐ Change Addition Delete TITLE MAR STREET ADDRESS STREET ADDRESS CIY-SI-DP CTTY-ST-ZDP ☐ Change ☐ Addition Delete ITTLE TITLE NAME STREET ADDRESS STREET ACCORESS CATY-ST-ZP CITY-ST-7P TITLE ☐ Detete TITLE Change Addition MAME STREET ADORESS STREET ADDRESS COTY-ST-ZIP C11Y-S1-ZP 12. I hereby certify that the information supplied with this filing does not quality 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 oddress, with all other like empowered. Men 9

O OFFICER OR DIRECTOR

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