

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000140973

1. Entity Name
XIN MING RESTAURANT INC.



Principal Place of Business
101N OHIO AVE.
LIVE OAK, FL 32064

Mailing Address
101N OHIO AVE.
LIVE OAK, FL 32064



01162006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1766271

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

SONG, GONG X
101N OHIO AVE.
LIVE OAK, FL 32064

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IN THIS SPACE**

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

**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

10. OFFICERS AND DIRECTORS

TITLE D
NAME SONG, GONG X
STREET ADDRESS 101N OHIO AVE.
CITY-ST-ZIP LIVE OAK, FL 32064

TITLE D
NAME WU, QIU H
STREET ADDRESS 101N OHIO AVE.
CITY-ST-ZIP LIVE OAK, FL 32064

TITLE
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1100000400000
02/01/06-80035-014 150.00

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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 *Gong X Song* *Qiu H Wu*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/16/06
Date

Daytime Phone #