

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000160875

1. Entity Name

GOLDEN HARBOR SUSHI & SEAFOOD, INC.



Principal Place of Business

9340 SOUTH 3RD STREET
JACKSONVILLE BEACH, FL 32250

Mailing Address

9340 SOUTH 3RD STREET
JACKSONVILLE BEACH, FL 32250



03022008 No Chg-P CR2E034 (11/05)

4. FEI Number

20-1933696

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

LY, VUONG
9340 SOUTH 3RD STREET
JACKSONVILLE BEACH, FL 32250

**DO NOT WRITE
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

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
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 P
NAME LY, VUONG
STREET ADDRESS P.O. BOX 54371
CITY-ST-ZIP JACKSONVILLE, FL 32245

TITLE VP
NAME LY, LISA
STREET ADDRESS P.O. BOX 54371
CITY-ST-ZIP JACKSONVILLE, FL 32245

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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CITY-ST-ZIP

U00000504745
04/26/06-80087-008 150.00

**DO NOT WRITE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-06

Date

Daytime Phone #