2007 FOR PROFIT CORPORATION

ANNUAL REPORT

Apr 23, 2007 8:00 am

FILED

DOCUMENT # P05000018216 1. Entity Name FOUR SEAS RESTAURANT INC.							Secretary of State 04-23-2007 90095 014 ***150.00				
Principal Place	e of Business	Mailin	Mailing Address			7					
	WOOD BOULEVARD	6024	6024 HOLLYWOOD BOULEVARD HOLLYWOOD, FL 33021 US			dani	400102-				
										IBK (1 KD)	
2. Principal P	lace of Business - No P.O. Box #	3. Mailing Address									
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.			04042007	Chg-P	CR2E0	34 (12/06)		
City & State	•	City	City & State			E .	4. FEI Number Applied For 20-2243689 Not Applicable				
Zíp	Country	Zip		Count	try		of Status Desired		\$8.75 Add	itional	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent ——						
V5.00.000 1 55					Name				.•		
	G, LEE LYWOOD BOULEVARD OOD, FL 33021				Street Address (P.O. Box Number is Not Acceptable)						
					City			FL	Zip Code	9	
	named entity submits this statement fi ions of registered agent.	or the purp	ose of changing its re	gistere	ed office or regis	tered agent, or bo	th, in the State of Fl	orida. I am f	amiliar with,	and accept	
SiGNATURE_											
	Signature, typed or printed name of registered agen	t and title if app	licable (NOTE: F	Pegisterec	d Agent signature requ	ired when reinstating)	, 	DATE	~;e+		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Finan Trust Fund Contribution.						5.00 May Be dded to Fees				·	
10.	OFFICERS AND	DIRECTORS 11				ADDITIONS	/CHANGES TO OF	FICERS AND	DIRECTORS	S IN 11	
TITLE	P		☐ Delete	TITLE					☐ Change	Addition	
NAME STREET ADDRESS	YEUN HING, LEE 6024 HOLLYWOOD BOULEVAR	PN .		NAME	E Et address						
CITY-ST-ZIP					-ST-ZIP						
TITLE	VP		☐ Delete	TITLE	:				☐ Change	Addition	
NAME	YUK MUI, KONG			NAM	- I						
STREET ADDRESS CITY-ST-ZIP	6024 HOLLYWOOD BOULEVAN HOLLYWOOD, FL 33021	RD			ET ADDRESS - ST- ZIP						
TITLE	10000,10 33021		Delete	IITLE	····				☐ Change	C Addition	
NAME			L.J Delete	NAME						☐ Addition	
STREET ADDRESS				STRE	ÉT ADDRESS						
CITY-ST-ZIP				CITY-	-ST-ZIP						
TITLE			☐ Delete	TITLE					☐ Change	☐ Addition	
NAME STREET ADDRESS				NAM6 STREE	ET ADDRESS						
CITY-ST-ZIP					-ST-ZIP						
TITLE			☐ Delete	TITLE					☐ Change	Addition	
NAME				NAME							
STREET ADDRESS CITY-ST-ZIP					et address - St- ZIP						
TITLE				1-					Channa .	☐ Addition	
NAME			☐ Delete	TITLE					☐ Change	☐ Addition	
STREET ADDRESS				STRE	ET ADDRESS						

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.

CITY-ST-ZIP

CITY-ST-ZiP