

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 29, 2007 8:00 am**  
**Secretary of State**

01-29-2007 90083 046 \*\*\*150.00

DOCUMENT # P05000091381  
 1. Entity Name  
 TOP CHINA BUFFETT, INC.



Principal Place of Business: 4026 W HILLSBOROUGH BLVD, DEERFIELD BEACH, FL 33442  
 Mailing Address: 1 EAST BROADWAY, 3RD FLOOR, NEW YORK, NY 10038

2. Principal Place of Business - No P.O. Box #: Suite, Apt. #, etc.  
 3. Mailing Address: Suite, Apt. #, etc.

City & State: [Blank]  
 Zip: [Blank] Country: [Blank]

01052007 Chg-P CR2E034 (12/06)  
 4. FEI Number: 20-3107083 Applied For: Not Applicable  
 5. Certificate of Status Desired:  \$8.75 Additional Fee Required



6. Name and Address of Current Registered Agent  
 LIU, CHEN  
 4026 W HILLSBOROUGH BLVD  
 DEERFIELD BEACH, FL 33442

7. Name and Address of New Registered Agent  
 Name: [Blank]  
 Street Address (P.O. Box Number is Not Acceptable): [Blank]  
 City: [Blank] FL Zip Code: [Blank]

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 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	<input checked="" type="checkbox"/> Delete
NAME	LIU, CHEN	
STREET ADDRESS	4026 W HILLSBOROUGH BLVD	
CITY-ST-ZIP	DEERFIELD BEACH, FL 33442	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LIU, CHEN	
STREET ADDRESS	4026 W HILLSBOROUGH BLVD	
CITY-ST-ZIP	DEERFIELD BEACH FL 33442	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: *Chen*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/05/07  
 Date

Daytime Phone #