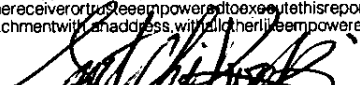


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90022 045 ***150.00

DOCUMENT# P06000044426 1. EntityName KINGHOUSERESTAURANT, INCORPORATED					
PrincipalPlaceofBusiness 13031 CORTEZ BLVD BROOKSVILLE, FL 34613			MailingAddress 13031 CORTEZ BLVD BROOKSVILLE, FL 34613		
2. PrincipalPlaceofBusiness - No P.O.Box# Suite, Apt. #, etc.		3. MailingAddress Suite, Apt. #, etc.			
City&State Zip Country		City&State Zip Country		4. FEINumber 20-4571186	
5. CertificateofStatusDesired ☐ \$8.75 Additional FeeRequired				AppliedFor ☐ NotApplicable	
6. NameandAddressofCurrentRegisteredAgent CHEN, SHANTANG 13031CORTEZBLVD BROOKSVILLE, FL34613				7. NameandAddressofNewRegisteredAgent Name StreetAddress (P.O.BoxNumberisNotAcceptable) City FL ZipCode	
8. Theabovenamedentitysubmits thisstatementfor thepurposeofchangingitsregisteredofficeorregisteredagent, orboth, i ntheStateofFlorida. Iamfamiliarwith, andaccept theobligationsofregisteredagent. SIGNATURE _____ (NOTE: Registered Agent's signature is required when re-instating) _____ DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing TrustFundContribution. ☐ \$5.00 MayBe AddedtoFees			
10. OFFICERSANDDIRECTORS			11. ADDITIONS/CHANGESTOOFFICERSANDDIRECTORSIN11		
TITLE NAME STREETADDRESS CITY - ST - ZIP	PD CHEN, SHANTANG 13031CORTEZBLVD BROOKSVILLE, FL34613	☐ Delete			
TITLE NAME STREETADDRESS CITY - ST - ZIP		☐ Delete			
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TITLE NAME STREETADDRESS CITY - ST - ZIP		☐ Delete			
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 information provided.					
SIGNATURE: 		4/11/08		(352) 596-2288	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					