

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 15, 2008 8:00 am
Secretary of State

01-15-2008 90032 050 ***150.00

DOCUMENT # P06000067846
1. Entity Name
NEW CHINA BUFFET INC

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 1800 S HIGHWAY 77 STE 500		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State LYNN HAVEN, FL		City & State	
Zip 32444	Country	Zip	Country

40003972

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4886728		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
FANG CHAN
Street Address (P.O. Box Number is Not Acceptable)
1800 S HWY 77 500
City
LYNN HAVEN **FL** **Zip Code**
32444

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT FANG CHAN 1800 S HWY 77 500 LYNN HAVEN FL 32444
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Fang Chan

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #