## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000015890 (5) CHINA GARDEN WEST DOWNTOWN, INC.

·

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

Principal Place of Business 531 FLEMING KEY WEST FL 33040

2. Principal Place of Business

Sulte, Apt. #, etc.

City & State

21

22

Mailing Address 531 FLEMING STREET KEY WEST FL 33040 FILED
Jan 28 1998 8:00am
Secretary of State



305-296-6177

Applied For

\$8.75 Additional

Fee Required

\$5 00 May 20

Not Applicable

DO NOT WRITE IN THIS SPACE

 Date Incorporated or Qualified 03/02/1993

58-2059378

5. Certificate of Status Desired

6 Election Campaign Financing

4. FEI Number

23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Cou	ntry	•	8. This corporation owes or has paid the current year Intangible	
24	25	29	30			Personal Property Tax due June 30.  Yes No	
	<ol> <li>Name and Address of Curr</li> </ol>	Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent A, KENNETH 81 Name					
TOMITA, KENNETH					Name		
833 EISENHOWER				82: Street Address (P.O. Box Number is Not Acceptable)			
SUITE 102					000000		
KEY WEST FL 33040				83			
				84	City	or 7 7in Code	
<b>\</b>				04	City	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0	02 and 607 1508, Florida Sta	atutes, the at	oove	-named corp	oration submits this statement for the purpose of changing its registere	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Cannot hut							
Sign 1 Pyped or printed name or registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	■ DELETE	1,1 117	ΪE		Change Additl	
NAME	TOMITA, K.		1.2 NA	ME			
STREET ADDRESS	833 EISENHOWER DRIVE		1.3 <b>\$</b> T	REET A	ADDRESS		
CITY-ST-ZIP	KEY WEST FL		1.4 CF	TY-ST	T- ZIP		
TITLE	ST	☐ DELETE	2.1 TIT	Œ		☐ Change ☐ Additi	
NAME	CHENG, NGAN		2.2 NA	ME			
STREET ADDRESS	3327 RIVIERA DR.		2.3 ST	REET /	ADDRESS	• *	
CITY-ST-ZIP	KEY WEST FL 33040		2. 4 CI	TY-S	T-ZIP		
TITLE		☐ DELETE	3.1 TH	LE.		☐ Change ☐ Additi	
NAME			3,2 NA	ME			
STREET ADDRESS	•		3.3 STREET ADI		ADDRESS		
CITY - ST - ZIP			3.4. C1	TY-S	T-ZIP		
TITLE		☐ DELETE	4,1 TIT	LE		Change Addition	
NAME			4. 2 N/	AME	1		
STREET ADDRESS			4.3 ST	REET /	ADDRESS		
City-ST-ZIP			4.4 CIT	Y-ST	r-zīP		
TITLE		DELETE	5.1 TIT	LE		Change Addition	
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 ST	REET /	ADDRESS		
CITY-ST-ZIP			5.4 CIT	Y-ST	r-ZIP		
TITLE		☐ DELETE	6.1 TIT	LE		Change Addition	
NAME			6.2 NA	ME			
STREET ADDRESS			6.3 ST	REET A	ADDRESS		
CITY-ST-ZIP			6.4 CIT	Y-ST	r-ZIP		
14. I hereby c	certify that the information supplied	with this filing does not qualif	y for the exe	mpti	ion stated in S	Section 119.07(3)(i), Florida Statutes. I further certify that the informatio	
officer or of Block 12 of	on ans annual teport of supplemen director of the corporation of the re or Block 13 if changed, or on an att	nar annuar report is true and a ceiver or trustee empowered tachment with an address	to execute the	his r	eport as requ	Section 119.07(3)(i), Florida Statutes. I further certify that the informatio e shall have the same legal effect as if made under oath; that I am an irred by Chapter 607, Florida Statutes; and that my name appears in	