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

PROFIT Mar 30 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS P93000025347 (4) DOCUMENT # ASIA RESTAURANT & BAR. INC. Principal Place of Business Mailing Address 6844 14TH STREET WEST 6844 14TH STREET WEST **BRADENTON FL 34207 BRADENTON FL 34207** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/01/1993 2. Principal Place of Business 2a. Mailing Address Applied For 26 65-0382420 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name CHENG, TAI W 6844 14TH ST. WEST 62 Street Address (P.O. Box Number is Not Acceptable) **BRADENTON FL 34207** 83 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE 1.1 TITLE Change Addition NAME CHENG, TAI W 1.2 NAME 346 MENDES DRIVE STREET ADDRESS 1.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE vst 2.1 TITLE Change Addition NAME FU. LING S **2.2 NAME** 346 MENDES DR STREET ADDRESS 2.3 STREET ADDRESS SARASOTA FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 32 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIF 3.4. CITY - ST - ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE TITLE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. 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 annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or in an attachment with an address.

FILED