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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #	P93000026026	(3)
L. Corporation Name		1-/

GOLDEN BOWL, INC.

## **FILED** May 02 1997 8:00am Secretary of State



Principal Piac 14690 S.W. 51 MIAMI FL 3317	ST ST.	Mailing Address 14690 S.W. 51ST ST. MIAMI FL 33175-5742	14690 S.W. 51ST ST.							
						3. Date Incorporated or Qualified 04/08/1993		te of Last F )1/1996	Report	
2. Principal P 21	Place of Business	2a. Mailing Address				4. FEI Number 65-0404458			pplied For of Applicable	
Suite, Apt	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired	
City & State 23	e	City & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zip 24	Country 25	Zip <b>29</b>	30 Cou	ntry	**************************************	This corporation has liability for in Florida Statutes	ntangible Yes <b>5</b>		i. 199.032,	
	9. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New Re	gistered /	gent		
SUE	EN, CHAN P			81	Name					
	90 S.W. 51ST ST. MI FL 33175		İ	82	Street Addr	ess (P.O. Box Number is Not Acceptab	le)			
				83						
				84			FL	( )	Code	
SIGMATURE	to the provisions of Sections our registered agent, or both, in the S imitamiliar with, and accept the o					oration submits this statement for the p ion's board of directors. I hereby accep ed when reinstating)	DATE	changing i	: registered	
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	3\$ IN 12	
Hill	P	☐ DELETE	1.1 1	TLE				☐ Change	Addition	
NAME	SUEN, CHAN P		1.2 N	AME						
STREET ADDIRESS	14690 S.W. 51ST ST.		1.3 \$1	REET	ADDRESS					
CITY-ST 71F	MIAMI FL 33175	Dirt	1.4 0		T-ZIP		<del></del>	1 05		
101.6		DELETE	2.1 TI		1			Change	Addition	
NAME			2.2 N							
STREET ADDRESS					ADDRESS				· ·	
C(fy - S1 - 7)P 1)11F		DELETE	2.4U		ST-ZIP			Change	Addition	
NAME			3.2 N							
STREET ADORESS					ADDRESS	•				
CHY SI-20			34.0	HY-5	ST-ZIP					
140		DELETE	4.1 TI	TLE				Change	Addition	
NAME			4.2 N							
STREEL ADDRESS					ADDRESS				1	
CITY - \$1 - 70°		DELETE	4.4 CI		1-ZIP			Change	Addition	
MLE MAG		L' DELETE	5.1 TI		1			C CHRINGE	L_ Addition	
NAME STREET ADDRESS			5.2 N/		ADDRESS					
City-ST-Z-			5.4 C							
Duf		DELETE	611		. 211			Change	Addition	
NAME		· -·-	6.2 N		1			•		
STREET ADDRESS					ADDRESS					
City - ST- ZiP			6.4 CI							
	by certify that the information sup	plied with this filing does not qua				in Section 119.07(3)(i), Florida Statute	s. I further	certify that	the	

reformation indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR