FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNITAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

DOCUMENT # P93000050645 (9) MIDO RESTAURANT,ING. Main y Address 20 Main y Address 21 Main y Address 22 Main y Address 23 Main y Address 24 Main y Address 25 Main y Address 26 Main y Address 27 Main injurphent or Qualified by C801/1993 28 Surv. Apr. #, etc. 29 Surv. Apr. #, etc. 20 Country 20 Surv. Apr. #, etc. 20 Country 20 Surv. Apr. #, etc. 20 Country 21 Declared to Status Decind 22 Main Address of Country Beginner for Country 29 Surv. Apr. #, etc. 20 Country 20 Surv. Apr. #, etc. 20 Country 21 Declared to Status Decind 22 Declared to Status Decind 23 Declared to Status Decind 24 Declared to Status Decind 25 Declared to Status Decind 26 Surv. Apr. #, etc. 27 Declared to Status Decind 28 Surv. Apr. #, etc. 29 Surv. Apr. #, etc. 20 Surv. Apr. #, etc. 21 Declared to Status Decind 22 Decended to Status Decind 24 Surv. Apr. #, etc. 25 Surv. Apr. #, etc. 26 Surv. Apr. #, etc. 27 Decind Status 28 Surv. Apr. #, etc. 29 Surv. Apr. #, etc. 20 Surv. Apr. #, etc. 21 Declared to Status Decind 22 Decended to Status Decind 25 Surv. Apr. #, etc. 26 Surv. Apr. #, etc. 27 Declared to Status Decind 28 Surv. Apr. #, etc. 29 Surv. Apr. #, etc. 20 Surv. Apr. #, etc. 21 Declared to Status Decinded to Status Decind to Person 25 Surv. Apr. #, etc. 26 Surv. Apr. #, etc. 27 Decended to Status Decinded to Status Decinded to Person 20 Surv. Apr. #, etc. 20 Surv. Apr. #, etc. 21 Decind Status 22 Surv. Apr. #, etc. 23 Surv. Apr. #, etc. 24 Surv. Apr. #, etc. 25 Surv. Apr. #, etc. 26 Surv. Apr. #, etc. 27 Decind Status 28 Surv. Apr. #, etc. 29 Surv. Apr. #, etc. 20 Surv. Apr. #, etc. 25 Surv. Apr. #, etc. 26 Surv. Apr. #, etc. 27 Surv. Apr. #, etc. 28 Surv		1996		Secretary of State ON OF CORPORA		ONS				
Proposed Place of Business Maining Address 200 N NewFERSITY DR 200 N NewFERSITY	1. Corporation	Name	000050645	(9)						
Name	MIDO H	IESTAURANT,ING								
SUMPRISE FL 33322 SUMPRISE FL 33322 2a	Principal Place of Business Mailing Address							16 101 11 111 1 1111 1		01001 0114 1961
2. Principal Place of Business 2. Melting Address 4. FET Number 55/01/1995 50/01/1995										
2	SUMMISE FL	35322	SUNHISE PL 33	322			2. Data Incorporated as Qualified	Tan Date o	flaet Ro	port
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LEE, HYE Y 2430 N UNIVERSITY DR SUNRISE FL 33322 80 City FL 85 City FL 85 City FL 85 City FL 85 City FL 86 City		9. Name and Address of C	Current Registered Agent		61	Name	10. Name and Address of New F	iegistereu Ag	jerit	
2430 N UNIVERSITY DR SUNRISE FL 33322 11. Pursuant to the provisions of Socions 607 0500, and 607, 1506, Fiorida Statutes, the above-named corporation softwarter for the provision of changing its registered office or registered agent, or both in the State of Fordis. Such change was authorized by the corporation's board of directors. Thereby accept the approximent as registered agent, and an arrangement agent and in a quadratic provision and provided by the corporation's board of directors. Thereby accept the approximent as registered agent, and an arrangement agent and in a quadratic provision and in a quadratic prov	LEE HY	FY			00		down (D.O. Boy Number is Not Assentat	ماما		
### City ### FL 8s Zp Code 11. Pursuant to the provisions of Sections 607,0500 and 607,1506, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am 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 specified agent in the first of the state of florida statutes. ### Signature, byside in indicate of a general and in figuration. ### Signature, byside in indicate of a general and in figuration. ### To Pricers AND DIRECTORS ###						Street Add	gress (F.O. Box Normber is Not Acceptate			
11. Pursuant to the provisions 607 0500 and 607 1506. Forists Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am serial form of agence in growing accept the obligations of, Sociolos Statutes. SIGNATURE SIGNATURE Signature, Special or intercitor of agence ingrine and in flags office. 12. OFFICERS AND DIRECTORS 112 12. OFFICERS AND DIRECTORS 113 INTE PD Change Addition ITIE PD LEE, HYE YOUNG LEE, HYE YOUNG 2430 N UNIVERSITY DR SUNRISE FL 11 TITLE 12 TITLE 24 TITLE 24 TITLE 14 CITY-S1-27P TITLE 15 TITLE 16 DELETE 27 TITLE 17 TITLE 18 DELETE 28 TITLE 18 TITLE 18 TITLE 18 TITLE 19 DELETE 34 CITY-S1-27P TITLE 18	SUNRISE	FL 33322			83					
The Portuant 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. Thereby accept the appointment as registered egent, I am registered agent, I am registered egent. I am regi					84	City		E 1	85 Zip	Code
12.	familiar with	h, and accept the obligations o	r, Section 607.0505, Florida S	tatutes.					gistered	agent. I am
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City-St-ZiP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information 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 TYPES OF PRINTED NAME OF SONING OFFICER OR DIRECTOR

4/20/96 (954)742 - 9197
Date Date

CR2E034 (12/95)