

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morman
Secretary of State
DIVISION OF CORPORATIONS

AND
FILED

95 MAR -2 PM 3: 23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000052416 (3)

1. Corporation Name

THE DUMPLING HOUSE OF MIAMI, INC.

Principal Place of Business

Mailing Address

10530 N.W. 26 ST.
SUITE F-202
MIAMI FL 33172

10530 N.W. 26 ST.
SUITE F-202
MIAMI FL 33172

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

07/20/1993

3a. Date of Last Report

05/24/1994

4. FEI Number

65-0426000

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 8341 NW 12nd Street

Suite, Apt. #, etc.

22

City & State

23 Miami, FL

Zip

24 33126

Country

25 USA

2a. Mailing Address

26 8341 NW 12nd Street

Suite, Apt. #, etc.

27

City & State

28 Miami, FL

Zip

29 33126

Country

30 USA

9. Name and Address of Current Registered Agent

ARROM, ORLANDO
10530 N.W. 26 ST.
SUITE F-202
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name

Chiu Kang Ching

82 Street Address (P.O. Box Number is Not Acceptable)

11211 NW 7th Street, Apt. #1

83

84 City

Miami

FL

85 Zip Code

33172

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

X

Chiu Kang Ching

Signature of Registered Agent required when registering

DATE

2-28-95

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	CHING, SHU HEI HUANG
STREET ADDRESS	11211 N.W. 7 ST., APT. 1
CITY - ST - ZIP	MIAMI FL 33172
TITLE	D
NAME	NG, PAK CHOI
STREET ADDRESS	674 N.W. 122 PASSAGE
CITY - ST - ZIP	MIAMI FL 33182
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	Ching, Shu Hwei Huang
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	DELETE
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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)(b), 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:

X *Shu Hwei Huang Ching*

Shu Hwei Huang Ching

DATE

2/24/95

(305)594-9799

Signature and typed or printed name of signing officer or director