COF	PROFIT RPORATION JAL REPORT 1997		FLORIDA DEPART Sandra B. Secretary DIVISION OF C	Mortham y of State		Mar 17 1 Secreta	997 8: ary of S	
		930000597 Hinese Restaur/						
Principal Place of Business 4109 TAMIAMI TRAIL PORT CHARLOTTE FL 33952			Mailing Address 4109 TAMIAMI TRAIL PORT CHARLOTTE FL 33952-8212					
					ĺ	3. Date Incorporated or Qualified 08/26/1993	3a. Date of Last 03/26/1996	Report
2. Principal F 21	flace of Business	28. M 26	lailing Address			4. FEI Number 65-0432324		pplied For lot Applicable
Suite, Apt	#, elc.	S	uite, Apt #, etc.	······································		5. Certificate of Status Desired	\$8.75	Additional
22 City & Star	00	27 C	ity & State			6. Election Campaign Financing		lequired May Be
23 Zip	Cour	28 Irv 7	ip	Country		Trust Fund Contribution 8, This corporation has liability for	Added	to Fees
24	25	29		30		Florida Statutes	Yes 🗌 No	
MOY	9, Name and Add /, LILY	ress of Current Register	ed Agent	B1 Name		10. Name and Address of New R	egistered Agent	
410	TAMIAMI TRAIL	0050		82 Street	Address	s (P.O. Box Number is Not Accepta	ble)	
POR	t charlotte fl 3	53952		83		<u></u>		
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11. Pursuant	to the provisions of Sc	ctions 607.0502 and 607	1508, Florida Statute	84 City	corpora	ation submits this statement for the	purpose of changing	Code its registered
 Pursuant office or agent 1 SIGNATURE 12. 	registered agent, or bo im familiar with, and ac Sameus types reported to	ctions 607,0502 and 607 ith, in the State of Florida. Scept the obligations of, S as of highered agent and little fla OF FICERS AND DIRECTO	Such change was a Section 607.0505, Flo pplicable (NOTE	s, the above-named uthorized by the con- rida Statutes. Registered Agent signature 13.	poration'	's board of directors. I hereby acce	DATE	its registered s registered
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