

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90191 017 ***158.75

DOCUMENT # P93000071629

1. Entity Name
MRS. CHEN'S CHINESE RESTAURANT, INC.



Principal Place of Business

6125 S. TAMiami TRAIL
SARASOTA, FL 34231

Mailing Address

6125 S. TAMiami TRAIL
SARASOTA, FL 34231

40085660



DO NOT WRITE IN THIS SPACE

02222007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0439470

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

TRAN, HUNG MINH
6125 S. TAMiami TRAIL
SARASOTA, FL 34231

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-18-07

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	TRAN, HUNG MINH
STREET ADDRESS	3801 72ND TERR E
CITY-ST-ZIP	SARASOTA, FL 34243
TITLE	T
NAME	TRAN, LAN NGO
STREET ADDRESS	3801 72ND TERR E
CITY-ST-ZIP	SARASOTA, FL 34243
TITLE	S
NAME	TRAN, PHI MINH
STREET ADDRESS	5711 41ST ST E
CITY-ST-ZIP	BRADENTON, FL 34203
TITLE	V. P.
NAME	TRAN, DUNG MINH
STREET ADDRESS	3801 72ND TERR E
CITY-ST-ZIP	SARASOTA, FL 34243
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-07

Date

Daytime Phone #