2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000071629

3801 72ND TERR. E

SARASOTA, FL 34243

Address:

City-St-Zip:

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

FILED Mar 29, 2009 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
	AMIAMI TRAIL A, FL 34231					
Current Mailing Address:			New Mailing Address:			
	AMIAMI TRAIL A, FL 34231					
FEI Number	: 65-0439470	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired (X)	
Name and	Address of C	Current Registered Agent:	Name and	Address of	New Registered Agent:	
	JNG MINH AMIAMI TRAIL A, FL 34231	US				
	e named entity : e of Florida.	submits this statement for the	purpose of changing i	ts registered	office or registered agent, or both,	
SIGNATUI						
Election Car		nic Signature of Registered Ag	gent		Date	
	-	g Trust Fund Contribution ().	ADDITION	IC (OLIANOF	C TO OFFICERS AND DIDECTOR	
OFFICER	S AND DIREC	IUKS:	ADDITION	IS/CHANGE	S TO OFFICERS AND DIRECTOR	
Title:	, ,	Delete	Title:	(() Change () Addition	
Name:	TRAN, HUNG N		Name:			
Address: City-St-Zip:	3801 72ND TEI SARASOTA, FL		Address: City-St-Zip:			
Title:	T (X) Delete	Title:	(() Change () Addition	
Name:	TRAN, LAN NG		Name:	`	, <u> </u>	
Address:	3801 72ND TEI	RR E	Address:			
City-St-Zip:	SARASOTA, FL	. 34243	City-St-Zip:			
Title:		Delete	Title:		(X) Change () Addition	
Name:	TRAN, PHI MIN		Name:	Address: 7791 AROLLA PINE BLVD.		
Address:	7791 AROLLA					
City-St-Zip:	SARASOTA, FL	. 34240	City-St-Zip:	SARASOTA, I	FL 34240	
Title:	, ,) Delete	Title:	,	(X) Change ()Addition	
Name:	TRAN, DUNG N	HINTI	Name:	TRAN, DUNG	IAIIIALI	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

3801 72ND TERR. E

SARASOTA, FL 34243

SIGNATURE: PHI TRAN VP 03/29/2009