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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1996

**DOCUMENT #** 1. Corporation Name

P93000078176 (3)

CHINA LUI RESTAURANT II, INC.

Principal Place of Business

Mailing Address

1079 S.E. 17TH STREET FORT LAUDERDALE FL 33316

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											<ol> <li>Date Incorporated or Qualified</li> <li>11/12/1993</li> </ol>		e of Last i 4/14/19	
2.	Principal Place of Business					2a. Mailing Address					4. FEI Number		<del>- j</del>	Applied For
21					26	26					65-0447890			Not Applicable
22	Suite, Apt. #, etc.					Suite, Apt. #, etc.					5. Certificate of Status Desired S8.75 Additional Fee Required			
23	City & State					City & State					6. Election Campaign Financing Trust Fund Contribution			00 May Be ed to Fees
24	Zip		25	Country	29	Ζιρ					8. This corporation has liability for Florida Statutes		ax under s	199.032,
		9, Name	end	Address of Current	Regis	tered Agent					10. Name and Address of New	Registered	Agent	
YANG, YANG 21140 NE 28TH AVENUE NORTH MIAMI BEACH FL 33180								81 82 83	82 Street Address (P.O. Box Number is Not Acceptable)					
								84	City			FL		ip Code
11.	or registere	od agent, or	both	of Sections 607.0502 I, in the State of Florid e obligations of, Section	a Suct	n change was auth	orized by th	bove-r e corp	named o oration's	orporations board o	on submits this statement for the post of directors. I hereby accept the ap	ourpose of chappointment as	anging its registere	registered office d agent. I am
SIC	SNATURE .	Signature, typed	l or prin	ted name of registered agent a	nd tite I	applicable	(NOTE: Registe	ered Ager	it signature	required wh	en reinstating)	DATE		
12.				OFFICERS AND	DIREC	CTORS	1	3.			ADDITIONS/CHANGES TO O	FICERS AND	DIRECT	ORS IN 12
THE	E	Р				☐ DELETE	1.	1 TITLE		T			Change	☐ Addition
NAN	AF.	YANG,	YAN	G			1.	2 NAME						
SIA	FET ADDRESS	21140	NE 2	6TH AVENUE			1.	3 STREET	ADDRESS	. ]				
CITY	7-ST-7IP			MI BEACH FL 331	80			4 CITY - S						
TIFL		S				DELETE		1 TITLE		<del> </del>			Change	[7] Addition
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	EET ADDRESS			STH-AVENUE			_		ADDRESS	1				
	r-ST-ZIP			MI-DEACH FL-891	An .									
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								2 NAME						
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NAA							4.	2 NAME						
STR	EET ADDRESS						4.	3 STREET	ADDRESS					
	1-S1-ZIP							4 CITY - S	1-712	<u> </u>				
TIIL						☐ DELETE	5	1 TITLE				[	Change	Addition
NAM	'F						. 5	2 NAME						
Sig	EE1 ADORESS						5	3 STAEET	ADDRESS					
CITY	- ST- ZIP						5	4 CITY - S	I - ZIP					
TOL	F					□ DELETE	6.	1 TITLE					Change	Addition
NAM	IE						6:	2 NAME		1				
STR	EET ADDRESS						6.:	3 STREET	ADDRESS	[				
CITY	'-\$T-ZIP						6.	4 CITY-S	T-71P	1				
14.	certify that oath; that I	the informa am an offic	tion ir er ör	ndicated on this annua	al repor ation o	t or supplemental a r the receiver or tru	furnished ar annual repo	nd doe	s not qu	occurate a	ne examption stated in Section 11 and that my signature shall have the port as required by Chapter 607,	ie same legal Florida Statut	effect as	if made under