## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000078176 (3)

CHINA LUI RESTAURANT II, INC.

## **FILED** Apr 21 1998 8:00am Secretary of State



Principal Place of Business Mailing Address						18841 18481 Itali (6219 841 1881		
1079 S.E. 17TH STREET 1079 S.E. 17TH STREET								
FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33				33316		DO NOT WRITE IN 16	DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified	NO DI MOL	
						11/12/1993		
2. Principal P	Place of Business	2a. Mailin	g Address			4. FEt Number	Applied For	
21		[26]				65-0447890	Not Applicable	
Suite, Apt.	#, etc.	Suite,	Suite, Apl. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22		[27]		<u>.</u>			Fee Required	
City & Stat	е	City & State				6. Flection Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	[ <b>28</b> ]   Žip		Countr	,	8. This corporation owes or has paid the		
24	25	29		30		Personal Property Tax due June 30.	X Yes No	
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Cur	and the second of the second	Agent			10. Name and Address of New Register	ed Agent	
YA	NG, YANG			81	Name			
21	140 NE 26TH AVENUE			82	Street A	Address (P.O. Box Number is Not Acceptable)		
NO	ORTH MIAMI BEACH FL 33180			L.				
				83	Į			
				84	City		. 85 Ζιρ Code	
		,			·	corporation submits this statement for the purpos poration's board of directors. I hereby accept the		
12.	Signature, typed or pointed more of regulated OFFICERS A	agent and to elif applica AND DIRECTORS		13.	Citt Signature	required when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12	
TITLE	P		DETLIE	1,1 101 F			Change Addition	
NAME	YANG, YANG 21140 NE 26TH AVENUE			1.2 NAME				
STREET ADDRESS	NORTH MIAMI BEACH FL	23180		1	ADDRESS			
CITY-ST-ZIP TITLE	HOTTI HINNIII DENOTITE		DELETE	1.4 CITY - 1 2.1 TITLE	51-21P		Change Additio	
NAME			L.J William	2.2 NAME	1			
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP				2 4 CITY-				
TITLE			DELETE	3.1 TITLE			Change Additio	
NAME				3.2 NAME				
STREET ADDRESS				3.3 STREE	ADDRESS			
CITY-ST-ZIP			· m · price	3.4 CITY-	S1-7IP		Chagos Addis	
TITLE			DITETE	4,1 TITLE			Change L Addition	
NAME REDUCES ADDRESS				4 2 NAME	LAnnaree			
STREET ADDRESS					AODRESS			
CITY-ST-ZIP TITLE			DELETE	51 1IILE	51 · ZII		Change Addition	
NAME :				5.2 NAME				
STREET ADDRESS					I ADDRESS			
CITY-ST-ZIP				5.4 CITY-	- 1			
TITLE			DELETE	6.1 TITLE			Change Addition	
NAME				6.2 NAME				
STREET ADDRESS				6.3 STREE	ADDRESS			
CITY-ST-ZIP	l			6.4 CITY-	S1 - ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 13 if changed, or on an attachment with an address.

954-523-0066