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95 MAY -1 PM 1:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000087713 (2)

1. Corporation Name

CHINA ROYAL RESTAURANT, INC.

Principal Place of Business

Mailing Address

15 AVENUE OF THE FLOWERS
LONGBOAT KEY FL 34228

15 AVENUE OF THE FLOWERS
LONGBOAT KEY FL 34228

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/23/1993

3a. Date of Last Report

05/01/1994

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

City & State

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City & State

23

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City & State

City & State

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4. FEI Number

65-0455886

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHEUNG, TAT Y

15 AVENUE OF THE FLOWERS
LONGBOAT KEY FL 34228

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

3921 78th Place East

83

84 City

Sarasota FL

FL

85

Zip Code

34243

11. The agent in the presence of Secretary of State, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in this State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Chapter 607, Florida Statutes.

SIGNATURE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS

NAME

STREET ADDRESS

CITY

STATE

ZIP CODE

NAME

STREET ADDRESS

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14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the nonpublic status in Chapter 119.07(3)(b), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as made under oath. I am an officer or director of this corporation or the receiver or trustee appointed to receive this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or as an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

813-383 5533