FILED Apr 29, 1999 8:00 am Secretary of State

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

		- 		04-29-1999 901 / / 00	01 ***150.00
DOCU	MENT # P94000	012319			
1 - Corpora io	AND GRILL OF GURNEE MI				
) (#84/684) (#8 /41/6 \$1/6) (#84/6 8 4/6) (: 1(0)0 (:000);(0) (:0)0 (0)1 (0)1
Principal Place	e of Rusiness	Mailing Address			
ì ·	e or pusitiess	-			
1957 71 ST Miami Fl 33 4	t .	1957 71 ST -#292		1	
US MIAMI-FL 33141				DO NOT WRITE IN THE	SPACE
		US		3. Date Incorporated or Qualifed 02/15/1994	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Nuriber	Applied For
214(04	F AURORA ST.	26 4104 AURA	ORA ST.	<u>36-3936936</u>	Not Applicable
Suite, Ap .	*#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State 23 () R A	L GABLES FL	City & State	LZS FI	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year In	
24 521	16 25 USA		10 USF	<u></u>	Yes No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registered	Agent
YELL	NG, HOI				
1957-71-31				Address (P.O. Box Number is Not Acceptable)	
MIAMI FL 33141				4 AUROLA SI	
1					
			84 City	RAIL GABLES FL	85 -Zip Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the above-named	corporation submits this statement for the purpose operation's board of directors. I hereby accept the appo	f changing its registered
office or r agent. I a	n familiar with, and accept the obligation	ਲਾ ਸਾਹਸਕਰ. Such change was aut tions of, Section 607.0505, Floric	norized by the corpo la Statutes.	pration's board of offectors, I hereby accept the appo	il tillelit as registred
SIGNATURE					_)
	Signature, typed or printed name if registered agen		egistered Agent signature r	equired when reinstating) DATE ADDITION(S/CHANGES TO OFFICERS AI	NI) DIDECTORS N 12
12.	, 	D DIRECTORS	13. 1,1 TITLE		
TITLE	D VEHICLE	□ nereie	2	4104 AURORA S CORAL GABLES, FO	Change [] Addition
NAME	YEUNG, HOIS		12 NAME	CONTROLLE TO	22111
STREET ADDRESS	- 1957-71-\$ T		1.3 STREET ADDRESS	CORAL GABLES, A	- 22/46
CITY-ST-ZIP TITLE	MIAMI FL D	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	YEUNG, QUAI'S	₩ 01011	22 NAME		
STREET ADDRESS	8362 PINES BLVD #292		2.3 STREET ADDRESS		
CITY-ST-ZIP	PEMBROKE PINES FL		2.4 CITY-ST-ZIP		
TITLE	FEMENORE FINES I	☐ D€LETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS	1		3.3 STREET ADDRESS)
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
			4.2 NAME		
ADDRESS			4.3 STREET ADDRESS		ļ
ST-ZIP			4.4 CITY-ST-ZIP		
_		☐ DELETE	5.1 TITUE	· · 	[] Change
-			5.2 NAME		
···· I AL/ORESS			5.3 STREET ADDRESS		ļ
··· ST-ZIP			5.4 CITY-ST-ZIP		
		☐ DELETE	6.1 TITLE		[] Change ☐ Addition

ST ZIP 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 orath; that I am ar officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

3.4 CITY-ST-ZIP

5.2 NAME 33 STREET ADDRESS

--__I ADDRESS

305-476-1611