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

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90170 004 ***150.00

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DOCUMENT # P94000047066

PANDA HOUSE CHINESE FAST FOOD, INC.

. <u></u>						
Principal Place of Business Mailing Address						
2700 POST STREET JACKSONVILLE FL 32205		2700 POST STREET JACKSONVILLE FL 3220	2700 POST STREET JACKSONVILLE FL 32205			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
						06/20/1994
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For
						59-3255897 Not Applicable
26					\$8.75 Additional	
					5. Certificate of Status Desired Fee Required	
		City & State	State			6. Election Campaign Financing S5.00 May Be
¬,		28	J., 4 0.1.1.			Trust Fund Contribution Added to Fees
23 Zip			Cou	Country		8. This corporation owes the current year Intangible
24	25	29	30			Personal Property Tax.
24	9. Name and Address of Cur		1001.	Γ		10. Name and Address of New Registered Agent
				81	Name	
POC	N, JOHN K			00	Ot A Add-	The Acceptable
2700 POST STREET				82	Street Addi	ess (P.O. Box Number is Not Acceptable)
JACKSONVILLE FL 32205				83		
ı					L	local 7% Octo
				84	City	FL 85 Zip Code
11 Pursuant	to the provisions of Sections 607	0502 and 607.1508. Florida Sta	tutes, the a	bove	e-named corp	oration submits this statement for the purpose of changing its registered
office or a	registered agent, or both, in the St	ate of Florida. Such change was	s authorize	d by	the corporation	on's board of directors. I hereby accept the appointment as registered
agent. I a	am familiar with, and accept the ob	eligations of, Section 607.0000,	-ionda Stat	utes		
SIGNATURE	Signature, typed or printed name of registered	arrent and title if applicable. (NO	TE: Registered	d Ager	nt signature required	d when reinstating) DATE
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE 1.1 TIT		ITLE		☐ Change ☐ Addition
NAME	POON, JOHN K.		1.2 NAME			
STREET ADDRESS			1.3 STREET		FADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL		14 C	ΠY-\$*	T-ZIP	
TITLE	VPD	☐ DELETE	2.1 T			☐ Change ☐ Addition
NAME	POON, POLLY		2.2 N	AME		
STREET ADDRESS	AZAA BOOT OTDEET			TREE	T ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL		سست السيب		T-ZIP	
TITLE	DELETE 3.1 TO				☐ Change ☐ Addition	
NAME			3.2 N	AME		•
STREET ADDRESS					T ADDRESS	•
	1			ZITY-S		
CITY-ST-ZIP TITLE	<u> </u>	☐ DELETE	4.1 T		-	Change Addition
NAME		_	4.21	AME		·
					T ADDRESS	
STREET ADDRESS				iTY-S		
CITY-ST-ZIP TITLE	□ DELETE 5.1 π				Change Addition	
NAME			5.2 N			
					TADDRESS	
STREET ADDRESS	1		0.00	IKEE		
CITY-ST-ZIP	i					
TITI F		☐ DELETE		ITY-S		☐ Change ☐ Addition
TITLE		☐ DELETE	5.4 C	ITY-S		☐ Change ☐ Addition
NAME STREET ADDRESS		☐) DELETE	6.1 T	ITY-S ITLE IAME		☐ Change ☐ Addition

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 suppliemental 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP