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

Mailing Address

EVERGREEN CHINESE RESTAURANT

PROFIT **CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90068 006 ***150.00

850784-8088

1-17-99

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400066637

Principal Place of Business

SIGNATURE:

EVERGREEN CHINESE RESTAURANT

FYL MANAGEMENT INC.

PANAMA CITY FL 32405		PANAMA CITY FL 32405				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			i
						09/12/1994			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Apı	plied For	
21		26				59-3266045	No	t Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				- Cartinata of Chattan Dominata	\$8.75 A	dditional	
22		27				5. Certifcate of Status Desired	Fee Re	quired	
City & State		City & State				6. Election Campaign Financing	\$5.00	May Be	i
23		28				Trust Fund Contribution	Added to	o Fees	
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year In	tangible		ı
24	25	29	9			Personal Property Tax.	Yes	□No	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered	Agent		
				81 Na	me				
FAN	g, lian		82 Street Add			(D.O. Charakteria Net Acceptable)			
2061	COVE BLVD.		62 5			et Address (P.O. Box Number is Not Acceptable)			
PAN	AMA CITY FL 32405			83					i
				84 City	у	FL	85 Zip C	ode	i
11 Pureuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the a	bove-nag	ned corpor	ation submits this statement for the purpose of	f changing its	registered	
office or n	poletored agent or both in the State of	Florida, Such change was auth	onzec	o ov tne c	corporation	's board of directors. I hereby accept the appo	intment as req	gistered	
agent. I a	m familiar with, and accept the obligation	1		utes.	Ð	1. 4	-16-9	7 4	
SIGNATURE	tion tag		19	Agent cions	iture required w	ter dend	10 1	<u></u>	_
12.	Signature, typed or printed name of registered agent a OFFICERS AND		13.	Agailt aighai	itale ledaned a	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12	CR2E034 (11/98)
TITLE	TS	☐ DELETE	1.1 Ti	TLE	$\neg \neg$		☐ Change	☐ Addition	7
	XUWEI, ZHAO		1,2 NAME						4
NAME	2061 COVE BLVD		•	TREET ADDR)E66			(္က
STREET ADDRESS	PANAMA CITY FL		B .		15.00				Z
CITY-ST-ZIP	VP	☑ DELETE	2.1 TI	TY-\$T-ZIP			☐ Change	Addition	$\ddot{\circ}$
TITLE	77	N OECCIL							
NAME	YOUNG, SHUN CHU		2.2 N						
STREET ADORESS	5702 BRENTWOOD MEADOWS		2.3 STREET ADDRESS		RESS				
CITY-ST-ZIP	BRENTWOOD TN			2.4 CITY-ST-ZIP			Change	Addition	
TITLE	T	Z T DELETE	3.1 TI		Į	•	Change		
NAME	LIU, DENGFA		32 N		ĺ				
STREET ADDRESS	4330 HARVARD DR SE		3.3 S	TREET ADDR	RESS				
CITY-ST-ZIP	WARREN OH		3.4, CIT					- Addison	
TITLE	VP	☐ DELETE	4.1 TI	TLE	ļ		☐ Change	☐ Addition	l
NAME	XUWEI, ZHAO	•	4, 2 N	IAME	1				
STREET ADDRESS	2061 COVE BLVD		4.3 S1	TREET ADDR	KESS				i
CITY-ST-ZIP			ITY-ST-ZIP						
TITLE		☐ DELETE	5.1 TI				Change	Addition !	i
NAME	l		5.2 N	AME	1				
STREET ADDRESS			5.3 S1	TREET ADDR	ress				ĺ
CITY-ST-ZIP			5.4 Cf	TY-ST-ZIP					
TITLE		☐ DELETE	6.1 TI	TLE			☐ Change	☐ Addition	İ
NAME	l		6.2 N/	AME	1				
STREET ADDRESS			6.3 ST	TREET ADDR	RESS		•		ĺ

6.4 CITY-ST-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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.