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PROF11 CORPORATION ANNUAL REPORT



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

1996 DOCUMENT #

P94000069628 (3)

SHANHAI CHINESE RESTAURANT, INC.

Principal Place of Business Mailing Address 37915 FOUNTAIN RD., S.R. 54 37915 FOUNTAIN RD., S.R. 54 ZEPHYRHILLS FL 33543 ZEPHYRHILLS FL 33543 3. Date Incorporated or Qualified 3a. Date of Last Report 09/19/1994 04/04/1995 2a. Mailing Address 4. FEI Number 2. Principal Place: Applied For 21 59-3270485 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zκ Country 8. This corporation has liability for intangible tax under s. 199,032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Curren: Registered Agent 10. Name and Address of New Registered Agent 81 Name HUYNH, HUNG Street Address (P.O. Box Number is Not Acceptable) 82 37915 FOUNTAIN RD., S.R. 54 ZEPHYRHILLS FL 33543 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the 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, Section 607.0505, Florida Statutes. SIGNATURE (NOTE_FC gratered Agent signature required when reinstaling) Stimulated typic floor professional of registered a post and title it applies to le DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 111.6 DELFTE 1 1 TITLE ☐ Change Addition HUYNH, HUNG NAME 1.2 NAME 505 1/2 WALNUT STREET STREET ATTURESS 1.3 STREET ADDRESS **AUBURNDALE FL 33823** 0114-51-20 14 CITY - ST- 7P 70.16 DELETE 2 1 TIFLE Change ■ Addition 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 2 4 CHY-ST-ZIP Oth 51-70 Tellif DELETE 3 1 TIFLE ■ Addition 1.434 STREET ADDRESS 3.3 STREET ADDRESS 0th 51-20 3 4 CITY - ST - 712 10112 [] DELETE 4 1 Tifté Change Change ☐ Addition 4.2 NAME STREET ACCIDENS 4.3 STREET ADDRESS Oth-SE Zif 4 4 CITY - ST - ZIP 10% DELETE 5 1 THLE ☐ Change Addition MARAS 5.2 NAME STREET ASSORESS 5.3 STREET ADDRESS CHY-ST ZIF 5.4 CITY - ST - ZIP 101.6 DELETE 6.1116.6 Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS STRUET ACCURESS

6.4 CITY - \$1 - 719 14. Ido hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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

SIGNATURE:

appears in Block 12 or Block

60°× 8 - 70°

HUYNH

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