2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P94000069628 Jul 19, 2000 8:00 am Secrétary of State SHANHAI CHINESE RESTAURANT, INC. 07-19-2000 90019 009 ***150.00 Principal Place of Business Mailing Address EILAND BLVD 37915 FOUNTAIN AB.: S.R. 54 37915 EILAN D 37915 FOUNTAIN RD.: 8:R-54 ZEPHYRHILLS FL 33543--ZEPHYRHILLS FL-33549-2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3270485 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NGUYEN, KHOLP Street Address (P.O. Box Number is Not Acceptable) 37915 FOUNTAIN RU. S.E. 54 EILAND BKVD ZEPHYRHILLS FL 33543 33541 City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After SEPTEMBER 13, 2000 Min. will be \$750.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS ☐ Addition ☐ Change TITLE Delete TITLE HUYNH, HUNG NAME / NAME STREET ADDRESS 505 1/2 WALNUT STREET STREET ADDRESS CITY-ST-7IP **AUBURNDALE FL 33823** CITY-ST-ZIE ☐ Addition TITLE ☐ Delete TITLE ☐ Change NGUYEN, KHOI P NAME NAME 37915 FOUNTAIN RD SE 54 EILAND BLVD STREET ADDRESS STREET ADDRESS ZEPHYRHILLS FL 39549-CITY-ST-ZIP CITY-ST-7IF 335241 ☐ Delete TITLE Change Addition TITLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change - -- ☐ Addition_ TITLE ☐ Defete - TIT) F-NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete THILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X STORY

SICATOR IN A POLICE OF DESIGNATURE AND TYPED OR PRINTED NAME OF SENING OFFICER OR DIRECTOR

7/12/200 (8/3)783-3659

ATTACHMENT P94000069678 PDDUB371

To: Division q Corporations Univers Business Report Filings P.O Box 1500 Tallahassee, FL 32302-1500

From: Shanhai Chinese Restaurant 37915 EILAND BLVD Zephyrhills, FL 33541

Dear Sir. Madam,

We did not recieve any renewal form in the past 6 month ago so we can't filling the form. May be the address incorrect please, correct goz us: 37915 EILAND BLVD, Zephyrhills FL 33541.

The address in the form was: 37915 Fountain Rd, Zephyrhills FL 33543.

Thank you very much

Thoi P. agruyen

sephyrhills July 12, 2000