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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400075332 (4)

PHOENIX GARDEN CHINESE RESTAURANT INC.

## **FILED** May 14 1997 8:00am Secretary of State



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Principal Place of Business Mailing Address  3933 NW 7TH ST 3933 NW 7TH ST MIAMI FL 33126 MIAMI FL 33126-5504						t endisten till softe denti dittit di	#194 WW111	#8111 1 <b>9</b> 391 B	LIEB MANN MILE	in seite name	
							3. Date incorporated or Qua 10/07/1994	slified		te of Last F <b>8/1996</b>	Report
2. Principal P	Place of Business	2e, Mailing Address 26	}···1				4. FEI Number Applied For 65-0526844 Applied For Not Applicate				·
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Required				
City & State 23	le	City & State	City & State				Election Campaign Financing     Trust Fund Contribution     Added to Fees				
Zip Country		Zip					8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24	g, Name and Address of 0		130				10. Name and Address of N				
NG	JOHNSON			81	Name						
3933 NW 7TH ST				82	Street	Addres	s (P.O. Box Number is Not Ac	ceptab	ole)		
MIAJ	MI FL 33128			83		-\					
				84	City				FL	<b>85</b> Zip	Code
11. Pursuant office or r agent 1 a SIGNATURE	1 1 (X	07.0502 and 607.1508, Florida Statut State of Florida Such change was robligations of, Section 607.0505, Florida agent and hite if applicable (NOT					ation submits this statement for the board of directors. I hereby when reinstating)	y accet	Durpose of of the appo	changing introduction	its registered s registered
12.				13.			ADDITIONS/CHANGES TO	OFFIC			
Title	PTSD			LA TOTLE						Change	Addition
NAME	NG, JOHNSON		1.2 NA								
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CITY+\$1+7iP	1		6.4 CI	1Y - S	1 - ZIP		****TDD: UU	<del></del>			

I do hereby certly that the information supplied with this filling 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 ruistee 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 a address.

SIGNATURE: