


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

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Apr 11 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # <b>P94000084110 (3)</b>					
1. Corporation Name <b>KUNG FU HOUSE INC.</b>					
Principal Place of Business <b>4301 W. VINE ST. A76-78 KISSIMMEE FL 34746 US</b>			Mailing Address <b>2946 SMITHFIELD DRIVE A76-78 ORLANDO FL 32837-7476 US</b>		
2. Principal Place of Business 21 <b>4301 W. Vine St</b> Suite, Apt. #, etc. 22 <b>-</b>		2a. Mailing Address 26 <b>2946 Smithfield DR</b> Suite, Apt. #, etc. 27 <b>-</b>		3. Date Incorporated or Qualified <b>11/10/1994</b>	
23 <b>KISSIMMEE FL</b> City & State 24 <b>34746</b> Zip 25 <b>Osceola</b> Country		28 <b>ORLANDO FL</b> City & State 29 <b>32837</b> Zip 30 <b>Orange</b> Country		3a. Date of Last Report <b>04/12/1996</b>	
9. Name and Address of Current Registered Agent <b>AU-YANG, SHINSIN/TSANG T 2946 SMITHFIELD DR ORLANDO FL 32837</b>		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 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 <i>Shinsin Au Yang</i> (NOTE: Registered Agent signature required when reinstating.) DATE <b>3-5-97</b>					
12. OFFICERS AND DIRECTORS					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP					
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP					
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP					
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP					
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP					
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP					
14. I do 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.					
SIGNATURE: <i>Shinsin Au Yang (SHINSIN AU YANG)</i> 3-24-97 931-3398 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					



CR2E034 (9/96)