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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 06 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000013493 (8)

CAFE SUN FUNG CORPORATION

Principal Pie	o of Business	Malling Address									
Principal Place of Business		Mailing Address									
14265 NW 7TI MIAMI FL 331		14265 NW 7TH AVENUE MIAMI FL 33168				ריט איטד אינטודב יא	I THIS SO	^E			
						DO NOT WRITE IN THIS SPACE  3. Date incorporated or Qualified					
						•					
2. Principal Place of Business 2a. Mailing Address			TT-BUSKEPL St			02/15/1995 4. FEI Number		TIAn	plied For	$\dashv$	
21		26			65-0558363			t Applicable	,		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				-	7 :	\$8.75 A	<del> </del>	7	
22		27				5. Certificate of Status Desired	! 	Fee Re	quired		
City & Stat	е	City & State				6. Election Campaign Financing		\$5.00	May Be	7	
23		28				Trust Fund Contribution		Added t	o Fees	_	
Zip	Country	Zip	Coun	itry		8. This corporation owes or has paid		_	_ ~		
24	24 25 29 30 30 9. Name and Address of Current Registered Agent					Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent					
104	<del></del>	III negistered Agent		31	Name	10, Name and Address of New Regis	itereu Agi	311		┥	
	ANG, PARVAZ		L								
14265 NW 7TH AVENUE MIAMI FL 33168			٤	32	Street Addres	s (P.O. Box Number is Not Acceptable)	)				
MIA	WI FL 33108		1	33		····				-	
-			L							4	
			ľ	34	City		FL <sup>l</sup>	85   Zip C	ode		
11. Pursuant	to the provisions of Sections 607.05	ove-i	named corpor	ation submits this statement for the purp	pose of ch	anging its	registered	1			
agent. I a	egistered agent, or both, in the Stati m familiar with, and accept the oblig	ations of, Section 607.0505, Flori	itnorized ida Statu	by t tes.	ne corporation	ation submits this statement for the purn's board of directors. I hereby accept t	ne appoin	iment as i	registered		
SIGNATURE											
			Registered Agent signature required			•	DATE			15	
12.	P OFFICERS AI	DELETE	13. 1.1 TITLE			ADDITIONS/CHANGES TO OFFICER		Change	S IN 12  Addition	70,0	
NAME	r Kwang, Parvaz		1.2 NAME				_	Onangs	Addition	15	
STREET ADDRESS	14265 NW 7TH AVE		1.3 STREE		DDDEEC					ŝ	
CITY-ST-ZIP	MIAMI FL		1.4 CITY-:		i					Ü	
TITLE	INITATAL L	☐ DELETE	2.1 TITLE		ZIP			Change	Addition	무면	
NAME		<u>—</u>	2.2 NAME								
STREET ADDFESS				2.3 STREET ADDRESS							
CITY-ST-ZIP			2. 4 CITY - S								
TITLE		DELETE	3.1 TITLE					Change	Addition	1	
NAME			3.2 NAME		ļ						
STREET ADDRESS			3.3 STREET		DDRESS						
CITY-ST-ZIP			3.4. CITY-		-ZIP						
TITLE		DELETE	4,1 TITLE					Change	☐ Addition	7	
NAME			4. 2 NAME								
STREET ADDRESS			4.3 STREET		DDRESS				-	十	
CITY-ST-ZIP			4.4 CITY - S		ZIP					İ	
TITLE		DELETE	5.1 TITLE					Change	Addition	1	
NAME			5.2 NAME								
STREET ADDRESS			5.3 STREET		DDRESS						
			5.4 CITY	-ST-	ZIP						
TITLE		DELETE 6.1 TI		E				Change	☐ Addition	1	

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 suppliemental 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.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE: V PARVAZ KWANG 2-2-98 4305) 681-0012