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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000036391 (7)

COLUMBUS SPANISH-CHINESE RESTAURANT, INC.

Principal Place of Business Mailing Address 3314 W. COLUMBUS DRIVE 3314 W. GOLUMBUS DRIVE TAMPA FL 33607-1820 **TAMPA FL 33607** 3. Date Incorporated or Qualified 3a. Date of Last Report 05/09/1995 02/22/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3310728 Not Applicable 26 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Country Zip Zio This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CHANG, SUSANA 3314 W. COLUMBUS DRIVE Street Address (P.O. Box Number is Not Acceptable) **TAMPA FL 33607 B3** City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) (96/6) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ Change Addition DELETE 1.1 TITLE TITLE CHANG, KING 1.2 NAME NAME 2903 W. COLLINS STREET 1.3 STREET ADDRESS STREET ADDRESS TAMPA FL 33607 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE CHANG, SUSANA 2.2 NAME NAME 2903 W. COLLINS STREET 2.3 STREET ADDRESS STREET ADDRESS **TAMPA FL 33607** CITY-ST-ZIE 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS **3.3 STREET ADORESS** 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY-ST-ZIP CITY-ST-7IP DELETE Change ___ Addition TITLE 51 TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City-St-ZIP CITY-ST-ZIP

SIGNATURE:

THLE

NAME

STREET ADDRESS

CITY-ST-ZIP

ATURE AND TYPED OR POINTED NAME OF SIGNING OFFICER OR DIRECT

DELETE

1

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 charged, or on an attachment with an address.

Davima Phone

Change

___ Addition

FILED

Feb 18 1997 8:00am

Secretary of State