## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P95000040733 1. Entity Name EVERGREEN OF CRYSTAL RIVER, INC.

FILED Mar 13, 2006 08:00 AM Secretary of State

Principal Place of Business
EVERGREEN CHINESE REST.
23B-A US HWY 41 S
INVERNESS, FL 34450 US

Mailing Address

EVERGREEN CHINESE REST. 238-A US HWY 41 S INVERNESS, FL 34450 U



## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

0205200	MB No Chg-P	CR2E034 (11/05)		
FEI Nu	mber	Applied For		
59-3	316594	Not Applicat		

5. Certificate of Status Desired

\$8.75 Additional Fee Required

TSUI, JENNY 490 NORTH SUN COAST BLVD. CRYSTAL RIVER, FL 34429

## DO NOT WRITE IN THIS SPACE

		į			
	named entity submits this statement for the purpose of changing its rions of registered agent.	registered office or	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_					
0101111011E	Signature, typed or printed name of registered agenciand life if applicable (NOTE:	रिवत्रोडासस्य मेवस्या अध्यानस्य	(gallstanier nertwickers	DATE	
FiL After Ma	E NOWIII FEE IS \$150.00 9. Election Campaignay 1, 2008 Fee will be \$550.00 Trust Fund Contri		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIRECTORS				
Title Name Street address City-St-Up	P HO-LONG, KUO 238-A US HWY 41 S INVERNESS, FL 34450		16000000ቀ፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡፡		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TSUI, JENNY 238-A US HWY 41 S INVERNESS, FL 34450		(00000465502 03/22/06-80039-006 150.110		
name Street address City-S1-Zip		DO NOT WE			
Title Name Street address City-S1-Zip			IN THIS SPACE		
TITLE NAME STREET ADDRESS CATY - S1 - ZIP					
Title Hame Street address City-St-Zip					

12. I hereby certily that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 direction 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNATURE AND TYPED ON PRINTED NAME OF SIGNATURE OF SIGNATURE OF DIRECTOR

3/0/06 352 72652