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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P95000073620**

1. Corporation Name

WANFU CHINESE RESTAURANT, INC.								IIEI <b>Bu</b> esi <b>Br</b> eii <b>Bu</b> sii 1	<b></b>		
Principal Place	e of Business	Mailing Address	·			_	1 10011001 110 10101 0	AN PRIN BEN BUD B	1841) ( <b>5488</b> 541)	18 81115 11	1811 4811 1881
1072 GARFIELD STREET 1072 GAF MELBOURNE FL 32935 MELBOUR						i					
								OT WRITE IN T	HIS SPAC	E	<del></del>
							Date Incorporated or 09/21/1995	Qualifed			
<u> </u>	ace of Business	2a. Mailing Address				4.	FEI Number <b>59-3338660</b>		-		lied For Applicable
Suite, Apt.	# otc	Suite, Apt. #, etc			-		33 000000		\$8		dditional
22 Suite, Apr.	#, etc.	27				5.	Certifcate of Status D	esired 🗍	, .	ee Req	
City & State	<del></del>	City & State	<del>-</del>			6	Election Campaign F	nancing _	\$!	5.00 N	May Be
23		28				"	Trust Fund Contributi			dded to	
Zıp	Country	Zip		Country		8.	This corporation owe	s the current yea			
24	25	29	30				Personal Property Ta		☐ Ye		□No
	9. Name and Address of Current	Registered Agent				10.	Name and Address	of New Registe	red Agent		
VEN	VIICH T			81	Name						
YEN, YUEH T 1072 GARFIELD STREET				82	Street A	Address (F	P.O. Box Number is No	t Acceptable)			
	BOURNE FL 32935						·		<u>-</u>		
IVICE	DOO!!!!E ! E 02303			83							
				84	City				FI 85	Zip Co	ode
11 Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida 5	Statutes, the	e above	e-named o	corporatio	n submits this stateme	nt for the purpos	e of chang	ing its r	egistered
l office or re	egistered agent, or both, in the State of manufacturers and familiar with, and accept the obligation	Florida Such change v	vas authori	zed by	the corpo	ration's b	oard of directors. I her	eby accept the a	ppointment	as reg	istered
	m tamiliai witti, and accept the obligatio	its of, decilar our look	o, i ionaci c	iciaioo							
SIGNATURE	Signature, typed or printed name of registered agent a	ind title if applicable	(NOTE Regist	ered Agen	t signature re-	guired when	reinstating)	DATE	E		·
12.	OFFICERS AND			13.			ADDITIONS/CHANGE	S TO OFFICERS			
TITLE	VP	☐ DEFE.	ſE :	1 TITLE						hange	Addition
NAME	yen, mei o		ì	2 NAME							
STREET ADDRESS	590 N. COURTENAY PARKWAY		:	3 STREET	ADDRESS						
CITY-ST-ZIP	MERRITT ISLAND FL 32952			4 CITY-ST	T- ZIP						
TITLE	DP	☐ DELE	TE 2	1 TITLE					CI	hange	☐ Addition
NAME	YEN, YUEH T		2	2 NAME							
STREET ADDRESS	590 N COURTENAY PARKWAY		2	3 STREET	ADDRESS						İ
CITY-ST-ZIP	MERRITT ISLAND FL 32952			4 CITY-S	T-ZIP		<del></del>				Addition
TITLE		DELE:		1 TITLE					Cr	ange	☐ Addition
NAME			ľ	? NAME							
STREET ADDRESS					SZBPOCA						
CITY-ST-ZIP		□ DELE		4 CITY S	T-ZIP				□ Cr	nange	Addition
TITLE .		U DELE		1 TITLE						unge	
NAME				2 NAME							
STREET ADDRESS			1		ADDRESS						
CITY-ST-ZIP		☐ DELE		4 CITY- S	1 · ZIP					hange	Addition
TITLE		الله الله	8	2 NAME							

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 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, with all other like empowered.

53 STREET ADDRESS

6 3 STREET ADDRESS

64 CITY-ST-ZIP

54 CITY-ST-ZIP

6 : TITLE

6.2 NAME

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Change

☐ Addition

**FILED** 

Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90142 010 \*\*\*150.00