


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

FILED

Apr 14 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 # P96000037778 (3) 1. Corporation Name HAPPINESS CHINESE RESTAURANT II INC.																																																																																																																																																															
Principal Place of Business 1401 ORANGE AVE S GREEN COVE SPRINGS FL 32043		Mailing Address 1401 ORANGE AVE S GREEN COVE SPRINGS FL 32043-4301																																																																																																																																																													
2. Principal Place of Business 21 Suite, Apt #, etc 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt #, etc 26 City & State 27 Zip 28 Country																																																																																																																																																													
9. Name and Address of Current Registered Agent CHIM, YUK C 1401 ORANGE AVE S GREEN COVE SPRINGS FL 32043		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 Y. C. Chim		DATE 3/17/97																																																																																																																																																													
12. OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>President / T / S / P</td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td>Yuk C Chim</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>3835 Starleaf Rd.</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>Jax FL 32210</td> <td></td> </tr> <tr> <td>TITLE</td> <td>V/P</td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td>Kun W Leung</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5930 Lenox Ave Apt 155</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>Jax FL 32205</td> <td></td> </tr> <tr> <td>TITLE</td> <td>V/P</td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td>Tommy Jim</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>5930 Lenox Ave Apt 151</td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td>Jax FL 32205</td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY - ST - ZIP</td> <td></td> <td></td> </tr> </table>		TITLE	President / T / S / P	DELETE	NAME	Yuk C Chim		STREET ADDRESS	3835 Starleaf Rd.		CITY - ST - ZIP	Jax FL 32210		TITLE	V/P	DELETE	NAME	Kun W Leung		STREET ADDRESS	5930 Lenox Ave Apt 155		CITY - ST - ZIP	Jax FL 32205		TITLE	V/P	DELETE	NAME	Tommy Jim		STREET ADDRESS	5930 Lenox Ave Apt 151		CITY - ST - ZIP	Jax FL 32205		TITLE		DELETE	NAME			STREET ADDRESS			CITY - ST - ZIP			TITLE		DELETE	NAME			STREET ADDRESS			CITY - ST - ZIP			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 <table border="1"> <tr> <td>1.1 TITLE</td> <td>President / T / S / P</td> <td>Change</td> <td>Addition</td> </tr> <tr> <td>1.2 NAME</td> <td>Yuk C Chim</td> <td></td> <td></td> </tr> <tr> <td>1.3 STREET ADDRESS</td> <td>3835 Starleaf Road</td> <td></td> <td></td> </tr> <tr> <td>1.4 CITY - ST - ZIP</td> <td>Jacksonville FL 32210</td> <td></td> <td></td> </tr> <tr> <td>2.1 TITLE</td> <td>V/P</td> <td>Change</td> <td>Addition</td> </tr> <tr> <td>2.2 NAME</td> <td>Kun W Leung</td> <td></td> <td></td> </tr> <tr> <td>2.3 STREET ADDRESS</td> <td>5930 Lenox Ave Apt 155</td> <td></td> <td></td> </tr> <tr> <td>2.4 CITY - ST - ZIP</td> <td>Jax FL 32205</td> <td></td> <td></td> </tr> <tr> <td>3.1 TITLE</td> <td>V/P</td> <td>Change</td> <td>Addition</td> </tr> <tr> <td>3.2 NAME</td> <td>Tommy Jim</td> <td></td> <td></td> </tr> <tr> <td>3.3 STREET ADDRESS</td> <td>5930 Lenox Ave Apt 151</td> <td></td> <td></td> </tr> <tr> <td>3.4 CITY - ST - ZIP</td> <td>Jax FL 32205</td> <td></td> <td></td> </tr> <tr> <td>4.1 TITLE</td> <td></td> <td>Change</td> <td>Addition</td> </tr> <tr> <td>4.2 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>4.3 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>4.4 CITY - ST - ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>5.1 TITLE</td> <td></td> <td>Change</td> <td>Addition</td> </tr> <tr> <td>5.2 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>5.3 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>5.4 CITY - ST - ZIP</td> <td></td> <td></td> <td></td> </tr> <tr> <td>6.1 TITLE</td> <td></td> <td>Change</td> <td>Addition</td> </tr> <tr> <td>6.2 NAME</td> <td></td> <td></td> <td></td> </tr> <tr> <td>6.3 STREET ADDRESS</td> <td></td> <td></td> <td></td> </tr> <tr> <td>6.4 CITY - ST - ZIP</td> <td></td> <td></td> <td></td> </tr> </table>		1.1 TITLE	President / T / S / P	Change	Addition	1.2 NAME	Yuk C Chim			1.3 STREET ADDRESS	3835 Starleaf Road			1.4 CITY - ST - ZIP	Jacksonville FL 32210			2.1 TITLE	V/P	Change	Addition	2.2 NAME	Kun W Leung			2.3 STREET ADDRESS	5930 Lenox Ave Apt 155			2.4 CITY - ST - ZIP	Jax FL 32205			3.1 TITLE	V/P	Change	Addition	3.2 NAME	Tommy Jim			3.3 STREET ADDRESS	5930 Lenox Ave Apt 151			3.4 CITY - ST - ZIP	Jax FL 32205			4.1 TITLE		Change	Addition	4.2 NAME				4.3 STREET ADDRESS				4.4 CITY - ST - ZIP				5.1 TITLE		Change	Addition	5.2 NAME				5.3 STREET ADDRESS				5.4 CITY - ST - ZIP				6.1 TITLE		Change	Addition	6.2 NAME				6.3 STREET ADDRESS				6.4 CITY - ST - ZIP			
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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: Y. C. Chim		DATE: 4/8/97																																																																																																																																																													



CR2E034 (9/96)