Feb 22, 1999 8:00 am Secretary of State

02-22-1999 90026 010 ***150.00

Mailing Address

2851 E. OAKLAND PK BLVD.

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000065642

1. Corporation Name

Principal Place of Business 2851 E. OAKLAND PK. BLVD.

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

POP ROCK SUSHI CAFE, INC.

FT. LAUDERDA	IALE FL 33141 FT. LAUDERDALE FL 33306						
US	US				DO NOT WRITE IN THIS SPACE		
-					3. Date Incorporated or Qualifed 08/06/1996	•	
2 Principal P	lace of Business	2a. Mailing Address			4. FEI Number		plied For
21	lace of Business	26			65-0688858		ot Applicable
Suite, Apt.	# etc	Suite, Apt, #, etc.					Additional
22	, o.c.	27			5. Certifcate of Status Desired		equired
City & State City & State					6. Election Campaign Financing	\$5.00	May Be
28			Trust Fund Contribution Added to Fees				
			Country 8. This corporation owes the current year Intangible				
24	25	29 30			Personal Property Tax.	∏ Yes	□No
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	Agent	
				Name			• "
PORNPRINYA, TONYA				Stroot Ad	dress (P.O. Box Number is Not Acceptable)	 -	
10800 BISCAYNE BLVD. #645				Street Au	dress (P.O. Box Number is Not Acceptable)		1
MIAMI FL 33161			83	-			
ĺ			84				
				City	FI	L 85 Zip	Code
44 Pursuant to the gravisions of Sections 607 0500 and 607 1508 Florida Stabiles, the above-paged compration 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) DATE							
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE ' I	D	Ď DELETE	1,1 TITLE	'	NONGLUCK VIPATASILPIN	☐ Change	Addition (
NAME .	MEKPONGSATORN, PATRA	·		12NAME (2831 E Oakland Park Blvd			
STREET ADDRESS	· ·		1.3 STREET ADDRESS				
CITY-ST-ZIP			1.4 CITY-ST	·ZIP	t. Lauderdale,FL 33306		
TITLE	D	☐ DELETE	2.1 TITLE		P	XX Change	Addition .
NAME	SAEELA, SURIN		2.2 NAME		Surin Saeeia		ł
STREET ADDRESS			2.3 STREET	ADDRESS	2381 E Qakland Park Blvd		f
CITY-ST-ZIP	FORT LAUDERDALE FL 33306		2. 4 CITY-ST	T-ZIP	Ft. Lauderdale, FL 33306		
TITLE		/ DELETE	3.1 TITLE	D		☐ Change	Addition
NAME			3.2 NAME	1	NIPAPORN CHAITHISANAN		J
STREET ADDRESS		<u></u>	3.3 STREET	ADDRESS 2	2831 E Oakland Park Blvd		ł
CITY-ST-ZIP			3.4. CITY-S1	r-zip 1	Ft Lauderdale, FL 33306		35.
TITLE	•	□ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME	****		4. 2 NAME	{			Ţ
STREET ADDRESS			4.3 STREET	ADDRESS			ĺ
CITY-ST-ZIP	<u> </u>		4.4 CITY-ST	-ZIP			
TITLE	 	□ DELETE	SITULE			Change	Addition

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 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.

6.2 NAME

5.2 NAME

DELETE.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

Change

☐ Addition