

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P96000066129

1. Entity Name
BAMBOO GARDEN III TAKE OUT INC.



Principal Place of Business
10041 PINES BLVD.
PEMBROKE PINES, FL 33024

Mailing Address
10041 PINES BLVD.
PEMBROKE PINES, FL 33024



01152008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0690208
Applied For
Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

YEUNG, MAN W
10041 PINES BLVD.
PEMBROKE PINES, FL 33024

DO NOT WRITE
IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME YEUNG, NAN W
STREET ADDRESS 10041 PINES BLVD.
CITY - ST - ZIP PEMBROKE PINES, FL 33024

TITLE STD
NAME TAIYAN, MOW
STREET ADDRESS 10041 PINES BLVD.
CITY - ST - ZIP PEMBROKE PINES, FL 33024

TITLE
NAME
STREET ADDRESS
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05/21/08-80005-024 150.00

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12. I hereby certify that the information supplied with this filing 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/08