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

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000070974 (6)

J & J FORTUNE COOKIE, INC.

## **FILED** Mar 06 1998 8:00am Secretary of State



| Principal Plac   | e of Business                 | Mailing Address      | Mailing Address     |          |             |                              | T TABLITABLE SIM TAKEN BEING BEING BEING BEING BEING BEING FEIN TABLIT BEING TAKEN TABLIT BEING |            |  |               |  |
|--|-------------------------------|----------------------|---------------------|----------|-------------|------------------------------|---|------------|--|---------------|--|
| }  |                               | 22620 BLUE FIN TRAIL |                     |          |             | Ì                            |   |            |  |               |  |
| 22620 BLUE FIN TRAIL<br>BOCA RATON FL 33428  |                               | BOCA RATON FL 33428  |                     |          |             |                              |   |            |  |               |  |
|  |                               |                      |                     |          | <u> </u>    | DO NOT WRITE IN THIS SPACE   |   |            |  |               |  |
|  |                               |                      |                     |          |             | 1 '                          | corporated or Qualified 2/1996  | ·          |  |               |  |
| 2. Principal P   | lace of Business              | 2a. Mailing Address  | 26. Mailing Address |          |             | 4. FEI Nu                    |   |            | 1                                      | applied For   |  |
| 21   |                               | 26                   |                     |          | 65-         | 0702376                      |   |            | lot Applicable                         |               |  |
| Suite, Apt. #, etc   |                               | Suite, Apt. #, etc.  |                     |          | 5. Certific | ate of Status Desired        |   |            | Additional<br>Required                 |               |  |
| City & Stat  | 0                             | City & State         |                     |          | 6. Electio  | n Campaign Financing         |   | \$5.00     | May Be                                 |               |  |
| 23   |                               | 28                   |                     |          | Trust F     | und Contribution             |   |            | to Fees                                |               |  |
| Zip  | Country                       | Zιρ                  | Cor                 | Country  |             | 8. This co                   | orporation owes or has  |            |  |               |  |
| 24   | 25                            | 29                   | 30                  |          |             |                              | al Property Tax due Jui   |            |  | ∐ No          |  |
|  | 9. Name and Address of Currer | nt Registered Agent  |                     | B1       |             |                              | and Address of New I  | Registered | Agent                                  |               |  |
| LAM, JOHN  |                               |                      |                     |          | Nam         | θ .                          |   |            |  | Į             |  |
| 22   | 22628 BLUE FIN TRAIL          |                      |                     |          |             | t Address (P.O. Box          | Number is Not Accept  | able)      | ······································ |               |  |
| BOCA RATON FL 33428  |                               |                      |                     | Ш        |             | ·                            |   | <u></u>    |  |               |  |
|  |                               |                      |                     | 83       |             |                              |   |            |  | [             |  |
|  |                               |                      |                     | 84       | City        |                              |   |            | 85 Zip                                 | Code          |  |
| 5<br>  |                               |                      |                     |          | -           |                              |   | FL         | <b>.</b>                               |               |  |
| 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. |                               |                      |                     |          |             |                              |   |            |  |               |  |
| onice or registered agont, or born, in the state or hondal such change was authorized by the corporation's board or directors. Finereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  |                               |                      |                     |          |             |                              |   |            |  |               |  |
| SIGNATURE  |                               |                      |                     |          |             |                              |   |            |  |               |  |
| Signature, typical or pointed name of registered agreet and tale if applicable (NOTE Registered a  |                               |                      |                     |          | nt signal   | re required when reinsleting |   | DATE       |  |               |  |
| 12.  |                               | DELETE               | 13.                 |          |             | ADDITIO                      | ONS/CHANGES TO OFF  | ICERS AN   | D DIRECTO                              |               |  |
| TITLE  | PTD IFFE T                    | L DETFIE             |                     |          |             |                              |   |            | Crange                                 | L.J. Addition |  |
| NAME   | WANG, JEFF T                  |                      | 1.2 NAME            |          |             |                              |   |            |  | Į             |  |
| STREET ADDRESS 28331 RANCHO GRANDE   |                               |                      | 1.3 STREET AD       |          |             | 3                            |   |            |  | ŀ             |  |
| CITY-ST-ZIP  | LAGUNA NIGUEL CA 92677        | - I briese           | 1.4 CITY-ST-        |          | - ZIP       |                              |   |            | Change                                 | Addition      |  |
| TITLE  | SVD                           | ☐ DELETE             | 2.1 TITLE           |          | 1           |                              |   | The Change | LI AGGILION [                          |               |  |
| NAME   | LAM, JOHN                     |                      | 2.2 NAME            |          |             |                              |   |            |  |               |  |
| STREET ADDRESS   | 22620 BLUE FIN TRAIL          |                      | 2.3 STREET ADDRESS  |          | 3           |                              |   |            |  |               |  |
| CITY-ST-ZIP  | BOCA RATON FL 33428           |                      | 2. 4 CHY-ST-ZIP     |          |             |                              |   |            |  |               |  |
| Tt1T€  | VP                            | ☐ DELETE             | -                   |          | 1           |                              |   | ☐ Change   | Addition                               |               |  |
| NAME   | LAM, JAMES                    |                      | 3.2 N               |          |             | {                            |   |            |  | ļ             |  |
| STREET ADDRESS   | 3996 W HILLSBORO BLVD         |                      | 3.3 STREET ADDRESS  |          | 3           |                              |   |            |  |               |  |
| CITY-S1-ZIP  |                               |                      |                     | ITY-\$   | T-ZIP       | <b></b>                      |   |            |  |               |  |
| TITLE  |                               | ☐ DELETE             | 4.1 Ti              |          |             |                              |   |            | ☐ Change                               | Addition      |  |
| NAME   |                               |                      | 4.2 N               |          |             |                              |   |            |  |               |  |
| STREET ADDRESS   |                               |                      | 1                   |          | ADDRES      | ; <u> </u>                   |   |            |  | }             |  |
| CITY-ST-ZIP  |                               |                      |                     | ITY - S1 | 1-ZIP       |                              |   |            |  |               |  |
| TITLE  |                               | ☐ DELETE             | 5 1 TI              |          |             |                              |   |            | Change                                 | Addition      |  |
| NAME   |                               |                      | 52 N.               |          |             |                              |   |            |  | ł             |  |
| STREET ADDRESS   |                               |                      | 5.3 S               | TAEET    | ADDRES      | 5 <b> </b>                   |   |            |  |               |  |
| CITY - ST - ZIP  |                               |                      |                     | ITY-SI   | I-ZIP       |                              | ·· <u></u>  |            |  |               |  |
| TITLE  |                               | DELETE               | 6.1 TI              | TLE      |             |                              |   |            | ☐ Change                               | Addition      |  |
| NAME   |                               |                      | 6.2 N               | AME      |             |                              |   |            |  |               |  |
| STREET ADDRESS   |                               |                      | 6.3 S               | TREET.   | addres      | 3                            |   |            |  | ł             |  |
| CITY-ST-ZIP  |                               |                      | 6.4 C               | ITY-SI   | r-ZIP       |                              |   |            |  |               |  |

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 supplichental 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 an attachment with an address

SIGNATURE:

JEFF T WANG

2-28-5