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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 13 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of state
DIVISION OF CORPORATIONS

DOCUMENT # P96000073814 (1)

SHANHAI CHINESE RESTAURANT OF PLANT CITY, INC.

Principal Place of Business Mailing Address								-	A MARKA MANANA BANDA DA			
805 S. COLLIN PLANT CITY F				805 S. COLLINS ST. PLANT CITY FL 33588-5517								
								3. Date Incorporated or Qualified 08/30/1996	3a. Date of L	ast Re	port	
2. Principal Pi 21		085	2a. Mailing Address 26					4. FEI Number 5,9-3402151		· · · · · · · · · · · · · · · · · · ·	olled For Applicable	
Suite, Apt	#, etc		Suite, Apt. #, etc.					5. Certificate of Status Desired Fee Required				
City & State	e		City & S	City & State				Election Campaign Financing Trust Fund Contribution		00.6 dded to	May Be Fees	
Ζιρ 24	Country 25		Z ₁ p			ountry		8. This corporation has liability for Intengible tax under s. 199.032, Florida Statutes Yes No				
		and Address of Curre			7			10. Name and Address of New Re				
HUY	YNH, HUNG				81	Na	me					
605 S. COLLINS ST. PLANT CITY FL 33586				8:			et Addre	fress (P.O. Box Number is Not Acceptable)				
PLANT CITY PL 33300												
•					84	City	,		FL 85	Zip C	ode	
11. Pursuant to	to the provisi egistered ag	ons of Sections 607.05 ent, or both, in the Stat	02 and 607.1508, e of Florida, Such	Florida Statutes change was au	the above	e-nan y the	ned corporation	oration submits this statement for the p on's board of directors. I hereby accep	urpose of change t the appointme	ing its	registered registered	
SIGNATURE												
	Signature, typed	gent and title if applicable	-18-18-18-18-18-18-18-18-18-18-18-18-18-			ature require		DATE	~ ~~~	3 10 1 4 6		
12.	D	OFFICERS AI	ND DIRECTORS	DELETE	13.			ADDITIONS/CHANGES TO OFFIC	EHS AND DIREC		Addition	
1	HUYNH, HUNG		_						L VIII	an Ac	Addition	
NAME	ANALIANT MARMANIA DO					1.2 NAME						
STREET ADORESS		HAVEN FL 33881			1.3 STREET		SS					
CITY-ST-ZIP	D	HAYEN FL 33001		DELETE	1.4 CITY - S	ST-ZIP			Ch	2000	Addition	
TITLE	HUYNH,	KIM			2.1 YITL€		İ		انان لیبیا ا	यासैक	Addition	
NAME		kim (E Marianna dr			2.2 NAME							
STREET ADDRESS		HAVEN FL 33881			2.3 STREET		\$S					
CITY-ST-ZIP TITLE	WINER	HATEN FL 33001		DELETE	2.4 CITY - 3.1 TITLE	ST-ZIP			Ch		Addition	
			·	DECEME				•	الله السبا	ai ige	Moningii	
NAME					3.2 NAME							
STREET ADDRESS					3.3 STREET		.55					
CITY-SI-ZIP				DELETE	3.4. CITY - 4.1 TITLE	ST-ZIP			☐ Ch		Addition	
TITLE			·						الله الله	ariye	XQQRIOII	
NAME					4. 2 NAME							
STREET ADDRESS					4.3 STREET		355					
CHY-ST-7IP THE				DELETE	4.4 CITY - S 5.1 TITLE	51 - ZIP		······································	☐ Ch	anne	Addition	
· · · · · · · · · · · · · · · · · · ·			·					• •	4. ∪	արբ	- VANHALI	
NAME CYNCEY ADDRESS					5.2 NAME	T 4 P.A.P.	ree	•.				
STREET ADDRESS					5.3 STREET		:50					
CITY-ST-7P	}			DELETE	5.4 CITY - S 6.1 TITLE	SI-ZiP			☐ Ch	2000	Addition	
THILE			,	DULLIE					Hamil Gill	cu iAg	rem vanition	
NAME:					6.2 NAME							
STREET ADDRESS	1				6.3 STREET	T ADDRE	SS					

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 copporation or this receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or of an attachment with an address.