

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2001 8:00 am
Secretary of State

02-05-2001 90021 044 ***150.00

DOCUMENT # P96000096044

1. Entity Name
CHINA TOKYO ORIENTAL RESTAURANT & LOUNGE, INC.

Principal Place of Business
**2360 PINE RIDGE RD
 NAPLES FL 34109**

Mailing Address
**2360 PINE RIDGE RD
 NAPLES FL 34109**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0712360**

Applied For
 Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HSU, RONG YEN
 2360 PINE RIDGE RD
 NAPLES FL 34109**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PT** ☐ Delete
 NAME **HSU, RONG YEN**
 STREET ADDRESS **2136 HARLONS RUN**
 CITY-ST-ZIP **NAPLES FL 34105**

TITLE ☒ Change ☐ Addition
 NAME **2136 HARLONS RUN**
 STREET ADDRESS **NAPLES FL 34105**
 CITY-ST-ZIP

TITLE **VPS** ☐ Delete
 NAME **HSU, KING TING**
 STREET ADDRESS **2136 HARLONS RUN**
 CITY-ST-ZIP **NAPLES FL 34105**

TITLE ☒ Change ☐ Addition
 NAME **2136 HARLONS RUN**
 STREET ADDRESS **NAPLES FL 34105**
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *X Rong Yen Hsu*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-01 941643266
 Date Daytime Phone #

CR2E034 (10/00)