-000 UNIFORM BUSINESS REPORT

DOCUMENT # P97000078600

Name

CHINA DUMPLING INC.

FILED
Jun 02, 2000 8:00 am
Secretary of State
06-02-2000 90001 039 ***150.00

Principal Place of Business / Mailing Address

CHINA DUMPLING INC.
1899-5 N CONGRESS AVENUE
BOYNTON BEACH, FLORIDA 33426

[redacted]

DO NOT WRITE IN THIS SPACE

Principal Place of Business | 3. Mailing Address

Suite, Apt. #, etc. | Suite, Apt. #, etc.

City & State | City & State

Country | Zip | Country

4. FEI Number 22-3559244

☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GALIMIDI, GARY
~~3379 NW 53RD CIR~~ 2950 Florida Blvd
~~BOCA RATON FL 33496~~ Delray Bch FL 33483

7. Name and Address of New Registered Agent

Name

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

City | FL | Zip Code

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

The 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, 2000 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

OFFICERS AND DIRECTORS

P
GALIMIDI, GARY
~~3379 NW 53RD CIR~~ 2970 Florida Blvd
~~BOCA RATON FL 33496~~ Delray Bch FL 33483

ADDRESS / CITY-ST-ZIP / TITLE / NAME / STREET ADDRESS / Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP / ☐ Change ☐ Addition

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.

X (Pres) 4/28/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR