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PROFIT . CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000079865 1. Corporation Name

GOLDEN CITY ORIENTAL CUISINE, INC.

FILED Feb 03, 1999 8:00am **Secretary of State**

02-03-1999 90031 008 ***150.00



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Principal Place of	of Business	Mailing Address							
17979 SAN CARLOS BLVD				~~.s+.	عدد در د				
FT. MYERS BEACH FL 33931		FT. MYERS BEACH FL 33931		DO NOT WRITE IN THIS SPACE					
• .					3. Date Incorporated or Qualif	ed			:
					09/15/1997		Angli	ad For	···
- F. Puninger		2a. Mailing Address			4. FEI Number	Applied For Not Applica			53.0
2. Principal Place of Business		26			65-0776898		\$8.75 Add		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	. 🗆	Fee Requ		
\neg		27					\$5. 00 м	av Be	
City & State		City & State			6. Election Campaign Financi Trust Fund Contribution	^{ng} 🗆	Added to		
─ `		28			8. This corporation owes the	current year Intai			•
23 Zip	Country	Zip	Coun	try	Personal Property Tax.	carron your	☐ Yes	No	
25		29	30		10. Name and Address of New Registered Agent				
	9. Name and Address of Curren	t Registered Agent		81 Name				Į	
		tent it till in lader			and the state of the Age	ontable)			
WINE	SETT, ROBERT A	2.34%		82 Street Add	ress (P.O. Box Number is Not Acc	septable)		<u> </u>	
WINESETT, ROBERT A 2248 1ST ST			ŀ	83			A10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
, FT. M	IYERS FL 33901		ļ			<u> 48.190 mar</u>	85 Zip Co	ode	ĺ
	• •	•	[84 City		FL			1
`		4 mm - 1 44 (2450 - 1 - 1)		ove-named cor	poration submits this statement fo	the purpose of	changing its r	egistered	
-11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Stat of Florida. Such change was	authorized	by the corporat	ion's board of directors. I hereby a	accept the appoir	Ittient as regi	, , ,	ļ
-11. Pursuant to the provisions of Sections 807.0502 and 607.1508. Florida Statutes office or registered agent, or both, in the State of Florida: Such change was authorities. I am familiar with, and accept the obligations of, Section 607.0505, Florida.			lorida Statu	ites.			* .	1.,	1
			TE. Dogietared	Agent signature requi					60
SIGNATURE	Signature, typed or printed name of registered age	THE GIRL GOOD IN COPPLIANT	13.	Agont orginates	ADDITIONS/CHANGES TO	OFFICERS AN	D DIRECTOR	Addition	×
12.		ND DIRECTORS	1.1 111	n.e.	F-97 (CR)		Change	[_] Addition	R2E034 (11/98)
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STREET ADDRES	166		T						

14. 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 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 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 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 on an attachment with an address, with all other like empowered.