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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9800001090

1. Corporation Name

PANDA CHINESE RESTAURANT, INC.

Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90078 046 ***150.00



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Principal	Place	of Business	Mailing Address				T I BON FOL UND I GUNT LEVEL GRENN BRONE BRONE BRONE BRONE ORGAN FRANCE BRONE CONTROL FRANCE CONTROL FOR CONTROL FRANCE CONTRO	Ц
1201 CLEVELAND STREET CLEARWATER FL 34615-4908			1201 CLEVELAND STREET CLEARWATER FL 34615-4908				DO NOT WRITE IN THIS SPACE	
•							3. Date Incorporated or Qualifed	\neg
	!						01/01/1998	- }
2 Princi	cipal Place of Business 2a. Mailing Address					. :	4 FEI Number Applied For	
21				¬ •			59-3483348 Not Applicab	le
	Apt.	#, etc.	Suite, Apt. #, etc.			<u> </u>	5. Certificate of Status Desired \$8.75 Additional	\neg
22			27				5. Certificate of status Desired Fee Required	
City & State			City & State				6. Election Campaign Financing \$5.00 May Be	
23			28				Trust Fund Contribution Added to Fees	
Zip		Country	Zip Country				8. This corporation owes the current year Intangible Personal Property Tax.	
24	<u> </u>	9. Name and Address of Current I					10. Name and Address of New Registered Agent	\dashv
	9. Name and Address of Current Rogistered Agent					Name	int a stantage T	\neg
TSAI, STANLEY T					82	Name 7	Iress (P.O. Box Number is Not Acceptable)	
	1886	DEL ROBLES DRIVE			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
CLEARWATER FL 34624-6429				•	83	1886	Del Rables Dr	
į .					84	City	De/Robles Pr VWater FL 85 Zip Code 33764	
	!					Clea	rwater FL 33764	
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above office or registered agent, or both, in the State of Florida. Such change was authorized by 						a-named cor	poration submits this statement for the nurnose of changing its registered	'
onic ager	e orre n,t. Iar	egistered agent, or both, in the State of m familiar with, and accept the obligatio	ons of, Section 607.0	505, Florida St	atutes		ion's board of directors. Friendly decept and appearanter as regions a	
SIGNAT	ÚRΕ						2.5	
	<u> </u>	Signature, typed or printed name of registered agent a		` _	_ <u> </u>	nt signature require	ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	- ∫ §
TITLE	+	OFFICERS AND DIRECTORS 13			TITLE	T.	Change Addit	ion
NAME				NAME				
STREET ADD	DRESS	1886 DEL ROBLES DRIVE		1.3	STREE	TADORESS		}
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NAME					NAME			
STREET AD	nees	1		6.3	STREE	TADORESS		- 1

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 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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP