PROFIT CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #	P98000034695
1 Company Name	<b>MAOUUUU04030</b>

ORIENTAL TASTE, INC.

Principal Place of Business 1324 BEACH BLVD JACKSONVILLE FL 32250 Mailing Address

1324 BEACH BLVD JACKSONVILLE FL 32250

## FILED Mar 16, 1999 8:00 am Secretary of State

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					3. Date incorporated or Qualifed			
					04/15/1998 4. FEI Number	T   A	-plied Co-	
2. Principal Pla	ace of Business	2a. Mailing Address			1	Applied For Not Applicable		
21	. <u> </u>	26			59-3503390			
Suite, Apt. (	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			
City & State		27 City & State			8. Election Campaign Financing \$5.00 May Be			
		<del>├</del> 5 '			Trust Funct Contribution Added to Fees			
23	Country	28	Cou	ntrv	This corporation owes the current year intang ble			
Zip	[25]	` r	30		Personal Property Tax.			
24	9. Name and Address of Curren		10. Name and Address of New Registered Age					
	3. Halla dire // data-0 0/ data-1			81 Name				
SET14	ADY, AGNES L							
	CREEKFRONT RD #504			82 Street	Address (P.O. Box Number is Not Acceptable)			
	SONVILLE FL 32256-8456			83	<u> </u>			
UACh	DOTTILL I C OLEGO OTOO			-				
	Λ		ļ	84 City	FL <sup>1</sup>	85 Zip	Code	
44 (0) (00) (0.01)	to the provisions of Sections 607 050	2 and 607 1508. Florida Statute	s the al	oove-named	corporation submits this statement for the purpose of cha	nging its	s registered	
office or re	gistered agent, or both, in the State	of Florida, Such change was au	thorized	by the corpo	corporation submits in statement for the purpose of character's poard of directors. I hereby accept the appointm	ent as re	egistered	
agent. Far	n familiar with, and accept the obligat	tions of, Section 607.0505, Flor		nes.	MARCH "	221	ga l	
SIGNATURE		& SETIADY POR			quirec when reinstating) DATE			
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND I	RECT	DRS IN 12  Addition	
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14 Lhereby C	actify that the information supplied wi	th this filing does not qualify for	the ever	notion etated	in Section 119.07(3)(i), Florida Statutes, I further certify	that the	information.	
indicated i	on this annual report or suppliemental	I annual report is true and accur	ste and	that my signa	sture shall have the same legal effect as if made under o	eth; thei	iam 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 cet; that I am an officer or director of the corporation of 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, of only a attachment with an address, with all other like empowered.

SIGNATURE: \_

D TYPEDOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/199

716 - 3151 Devtime Phone #