

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Mar 13, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # P98000042557**

1. Entity Name

CHINA CITY RESTAURANT, INC.



Principal Place of Business  
1221 4TH STREET, NORTH  
ST. PETERSBURG FL 33701

Mailing Address  
1221 4TH STREET, NORTH  
ST. PETERSBURG FL 33701



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number  
59-1517939

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

MOON, JAMES  
1221 4TH STREET, NORTH  
ST. PETERSBURG FL 33701

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2006 Fee Will Be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete  
NAME MOON, MAR FEE  
STREET ADDRESS 2801 38TH AVE. NORTH  
CITY-ST-ZIP ST. PETERSBURG FL 33713

☐ Change ☐ Addition  
U00000462997  
03/21/06-80059-011 150.00

TITLE VPD ☐ Delete  
NAME MOON, JAMES  
STREET ADDRESS 1425 14TH ST. NORTH  
CITY-ST-ZIP ST. PETERSBURG FL 33701

☐ Change ☐ Addition

TITLE D ☐ Delete  
NAME MOON, TANSY  
STREET ADDRESS 120 MYRTLE STREET  
CITY-ST-ZIP NEPTUNE BEACH FL 32266

☐ Change ☐ Addition

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

3-10-06 122-822-3713