1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000066108

1. Corporation Name

TOKYO DELITE, INC.

Principal	Place	of	Business

Maijing Address

FILED Mar 24, 1999 8:00 am Secretary of State

03-24-1999 90068 023 ***150.00



61 S. FEDERAL HIGHWAY (147) 34 (147) 61 S. FEDERAL HIGHWAY DEERFIELD BEACH FL 33441		DO NOT WRITE IN THIS SPACE				
			3. Date Incorporated or Qualifed 07/27/1998			
2. Principal Place of Business	2a. Mailing Address	<u> </u>	4. FEI Number	Applied For		
26			65-0853592	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	*\$5.00 May Be Added to Fees		
Zip Country	Zip C	Country	8. This corporation owes the current year Int	tangible		
24 25	29 30		Personal Property Tax.	☐Yes ☐No		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
LEE, TZU-LIEN 5223 N.W. 54 AVE.		81 Name 82 Street Add	dress (P.O. Box Number is Not Acceptable)			
COCONUT CREEK FL 33073	441 -	83		· -		

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered of Florida Statutes of Florida Statutes.

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ragent i am, ramiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.							1
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO	OFFICERS AN	D DIRECTÓ	RS IN 12
TITLE	D	DELETE	1.1 TITLE			Change	Addition
NAME	LEE, TZU-LIEN		1.2 NAME			:	
STREET ADDRESS	5223 N.W. 54 AVE.		1.3 STREET ADDRESS			<i>f</i>	
CITY-ST-ZIP	COCONUT CREEK FL 33073		1.4 CITY-ST-ZIP			<i>.</i> *	
TITLE		DELETE	2.1 TITLE			Change	☐ Addition
NAME	LEE, CATHY P		2.2 NAME			1	
STREET ADDRESS	5223 N.W. 54 AVE.		2.3 STREET ADDRESS				
CITY+ST-ZIP	COCONUT CREEK FL 33073		2. 4 CITY-ST-ZIP			*	
TITLE		DELETE	3.1 TITLE	ري المهاي ها همستاري بود مها	7	1 Change	☐ Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS			;	
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		DELETE	4.1 TITLE			Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS	•			
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				ĺ
CITY-ST-ZIP			54 CITY+ST-ZIP				
TITLE		DELETE	6.1 TITLE			Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP		.=	6.4 CITY-ST-ZIP	 			

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.

SIGNATURE:

Zip Code

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