FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S61939** **(2)**

1. Corporation Name
CHINESE KITCHEN AND FINE FOOD, INC.

Principal Place of Business
4901 PALM BEACH BLVD.
SUITES 4 & 5
FT. MYERS FL 33905

Mailing Address
4901 PALM BEACH BLVD.
SUITES 4 & 5
FT. MYERS FL 33905

3. Date Incorporated or Qualified: 06/25/1991
3a. Date of Last Report: 04/27/1995
4. FEI Number: 65-0285518 — [ ] Applied For [ ] Not Applicable
5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [X] Yes [ ] No

2. Principal Place of Business
21
22 Suite, Apt. #, etc.
23 City & State
24 Zip 25 Country

2a. Mailing Address
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip 30 Country

9. Name and Address of Current Registered Agent
RAMUNNI, STEVEN A.
150 SOUTH MAIN ST.
LABELLE FL 33935

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ____ DATE ____

12. OFFICERS AND DIRECTORS

TITLE	DS	[X] DELETE
NAME	CHOW, KAI-FU	
STREET ADDRESS	4901 PALM BEACH BLVD.	
CITY-ST-ZIP	FT. MYERS FL	
TITLE	T	[X] DELETE
NAME	CHOW PATRICIA	
STREET ADDRESS	4901 PALM BEACH BLVD.	
CITY-ST-ZIP	FT. MYERS FL	
TITLE	DP	[ ] DELETE
NAME	CHOW, KAM-CHIU	
STREET ADDRESS	4901 PALM BEACH BLVD.	
CITY-ST-ZIP	FT. MYERS FL	
TITLE	DV	[ ] DELETE
NAME	CHOW, CHUN-YEE	
STREET ADDRESS	4901 PALM BEACH BLVD.	
CITY-ST-ZIP	FT. MYERS FL	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DS	[ ] Change [X] Addition
1.2 NAME	ON-PING WEI	
1.3 STREET ADDRESS	217 MORSE PLAZA	
1.4 CITY-ST-ZIP	FT. MYERS FL 33905	
2.1 TITLE	T	[ ] Change [X] Addition
2.2 NAME	SEK-YEE WONG	
2.3 STREET ADDRESS	217 MORSE PLAZA	
2.4 CITY-ST-ZIP	FT. MYERS FL 33905	
3.1 TITLE		[ ] Change [ ] Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		[ ] Change [ ] Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		[ ] Change [ ] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		[ ] Change [ ] Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Kam Chiu Chow — 3/8/96 — (941)694-1599
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
KAM-CHIU CHOW, PRESIDENT

CR2E034 (12/95)