

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVED
AND
FILED

501-1 1111:36
SECRET
TALLAHASSEE, FLORIDA

DOCUMENT # S69868 (5)
1. Corporation Name
CHINESE WOKOUT, INC.

Principal Place of Business Address
**1444 BELCHER RD S
CLEARWATER FL 34641-5204**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **07/26/1991** 3a. Date of Last Report **04/22/1994**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-3076486	☐ Not Applicable
State, Apt. #, etc.	State, Apt. #, etc.	5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
22	27	6. Election Campaign Financing	☐ \$5.00 May Be Added to Fees
City & State	City & State	Trust Fund Contribution	☐
23	28	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	☒ Yes ☐ No
Zip	Zip		
24	29		
Country	Country		
25	30		

9. Name and Address of Current Registered Agent

**CHAU, DUC VO
1444 BELCHER RD S
CLEARWATER FL 34646**

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of Sections 607.04(3) 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

(Signature of Agent, if different from Registered Agent, must be signed by Agent)

(Signature of Registered Agent, if different from above-named agent)

(Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PVS	1.1 TITLE	☐ Change ☐ Addition
NAME	CHAU, DUC VO	1.2 NAME	
STREET ADDRESS	1444 BELCHER RD S	1.3 STREET ADDRESS	
CITY, ST, ZIP	CLEARWATER FL	1.4 CITY, ST, ZIP	
TITLE	TD	2.1 TITLE	☐ Change ☐ Addition
NAME	CHAU, DUC VO	2.2 NAME	
STREET ADDRESS	1444 BELCHER RD S	2.3 STREET ADDRESS	
CITY, ST, ZIP	CLEARWATER FL	2.4 CITY, ST, ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		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, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 135.02(4), 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 transfer predecessor 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 addition.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DUC VO CHAU

President

4-18-95

(813) 531-6000