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

PROFIT CORPORATION ANNUAL REPORT



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

1996

S75102 **DOCUMENT #**

(1)

CHINA PALACE OF BARTOW, INC.

Principal Place of Business 1206 NORTH BROADWAY BARTOW FL 33830			Mailing Address 1206 NORTH BROADWAY BARTOW FL 33830							
							3. Date Incorporated or Qualified 08/19/1991	3a. Date o 01/1	Last Re 7/199	eport 5
2. Principal Pla	nce of Business	2a.	. Mailing Address			 -	4. FEI Number 59-3080648	<u> </u>	\rightarrow	Applied For Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		28	City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00	May Be
Zip	Country 25	29	Zip	30 Cou	มาtry		8. This corporation has liability for in Florida Statutes			
<u> </u>	9. Name and Address of Current		stered Agent	11			10. Name and Address of New R	egistered Ag	ent	
			CONTRACTOR OF THE CONTRACTOR OF THE SECOND O		81	Name				
ATTAWAY, JOHN A JR 202 E WALNUT STREET			82 3			Street Add	fress (P.O. Box Number is Not Acceptabl	e;		
	ID FL 33801				83		····			
					84	City		FL	85 Zıç	Code
or register	o the provisions of Sections 607.0502 ed agent, or both, in the State of Florid h, and accept the obligations of, Secti	a Suct	h change was authorize	s, the about the	oorp	named corpo oration's bo	oration submits this statement for the purp and of directors. I hereby accept the appo	pose of chang pintment as re	jing its registered	egistered office agent. I am
SIGNATURE										
	Signature, typied or printed name of registered agent a	rad the if	8) pradir (NOI	F Regelerer	1 A jer	d signature region	ec when recistating)	DATE		
12.	OFFICERS ANS	DIREC		13.			ADDITIONS/CHANGES TO OFFI			
TITLE	- -		DELETE	1 11	IILE	}		Ц	Change	☐ Addition
NAME	TE, FRANK TONG			1.2 N	AMÉ					
STREET ADDRESS	1206 NORTH BROADWAY			. 13S	TREET	ADDRESS				
CITY-ST-ZIP	BARTOW FL DVP			140	:TΥ-5	ST - ZIP				
TITLE	J		DEFELE	2 11	IITLE				Change	☐ Addition
NAME	CHHUO, JULI GUOCH			22 N	AME					
STREET ADDRESS	1206 NORTH BROADWAY BARTOW FL			23 S	IREEI	ADDRESS				
CITY-ST-ZIP				240	iTY+\$	ST · ZiP				
TITLE	DS DETER		☐ DELETE	3 1 1	ITLE				Change	Addition
NAME	TE, PETER			32 N	AME					
STREET ADDRESS	1206 NORTH BROADWAY			33.5	TREE	T ADDRESS				
CITY-ST-ZIP	BARTOW FL			340	ITY - S	ST - ZIP				
TITLE			DELETE	4 1 7	TITLE				Change	☐ Addition
NAME				4 2 N	AME					
STREET ADDRESS				4 3 S	TREET	ADDRESS				
CITY-ST-ZIP				440	1TY - S	ST-ZIP				
THILE			DELETE	5 11	TITLE				Change	Addition
NAME				5 2 N	AME					
STREET ADDRESS				53\$	TREE	ADDRESS				
CITY-ST-ZIP				54.0	HY-S	ST - Z IP				
TITLE			☐ DELETE	â 1 î	III.E				Change	Addit:on
NAME				32 N	AME					
STREET ADDRESS				535	TREE	ADDRESS				ł
CITY-ST-ZIP				640	11Y - 9	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 trusted 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:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-96 (94) 533-4232 Destrict Phone 1