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 #

V06627

(6)

CHINA SEA RESTAURANT, INC.

	SEA RESTAURANT, INC.	Mailing Address					
Principal Place of 97860 OVERS KEY LARGO	SEAS HWY	1039008 OVERSEAS	103900B OVERSEAS HWY. KEY LARGO FL 33037-2816				
US	12 5507				3. Date incorporated or Qualified 01/15/1992	3a. Date of t	ast Report 01/1995
- D: 1:100	- +1 Duo coso	2a. Mailing Address			4. FEI Number	.1	Applied For
2. Principal Plac	e or pasiliess	26			65-0302148		Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.	-1.		5. Certificate of Status Desired	\$	8.75 Additional Fee Required
City & State	4	City & State			Election Campaign Financing Trust Fund Contribution	Ц	\$5.00 May Be Added to Fees
Zip	Country 25	Zip 29	Gount	ту	Tioned Citation	□ No	
4	g. Name and Address of Curre		14-1		10. Name and Address of New R	egistered Age	nt
	g		8	1 Name			
STOKY, RUTH C				2 Street Addr	ess (P.O. Box Number is Not Acceptat	le)	
103900B OVERSEAS HWY				- Cardot / tous	Ileas (See Elea Control Contr		
	ARGO FL 33037		8	3			
			-	4 City	ration submits this statement for the pu	FLI	5 Zip Code
SIGNATURE	and accept the obligations of, Ser			gertsjind herhethie	abbitions/CHANGES TO OFF	DATE ICERS AND DI	RECTORS IN 12
12.	D DELET		1.17(1)(6				Change
NAME	STOKY, ROBERT C.		1.2 NAN	1:			
STREET ADDRESS	6 NORTH DR		13 SIR	EFT ADDRESS			
CITY-ST-ZIP	KEY LARGO FL		1.4 CITY	r - ST - ZIP			
TITLE	D	☐ DELETE	2.1 [1]	LF .			Change [Addition
NAME	STOKY, RUTH C.		2.2 NA^	i i			
STREET ADDRESS	6 NORTH DR			EET ADDRESS			
CITY - ST - ZIP	KEY LARGO FL			Y - ST - ZIP			Change Addition
TITLE	D DODERT CIL	DELETE	3 1 111				
NAME	STOKY, ROBERT C II		3.2 NAME 3.3 STREET ADDRESS				
STREET ADDRESS	6 NORTH DR KEY LARGO FL			Y - ST - 7IP			
CITY - S1 - ZIP	NET LANGU FL	DELETE	4 1 (1)				Change 🔲 Addit.on
TITLE		<u> </u>	4.2 NA1				
NAME CONTET ADDRESS			•	GEL ADDRESS			
STREET ADDRESS City-ST-ZIP				Y ST-ZIF			
TITLE		☐ DELETE	5 1 181		-		Change
NAME			5.2 NA	ME			
STREET ADDRESS			5 3 STI	REET ADDRESS			

14. I do hereby certify that the information supplied with this filing is voluntarily turnished 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 certify 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 only attachment with an address

SIGNATURE:

| STORY | May 1/1996 | 305-852-082 | May 1/1996 | May 1

5.4.0(TY - ST - ZIP

6.4 CHY-ST-ZIF

6 1 TITLE 6.2 NAME € 3 STREET ADDRESS

CITY - 51 - ZIP

STREET ADDRESS

Decele

/MAY 11,1996 /305-852-0822

☐ Change

☐ Addition