

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

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
95 MAY -1 PM 1:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V23650

(7)

1. Corporation Name

ORIENTAL STAR CHINESE RESTAURANT, INC.

Principal Place of Business

**1670 WELLS RD
SUITE 110
ORANGE PARK FL 32073**

Mailing Address

**1670 WELLS RD
SUITE 110
ORANGE PARK FL 32073**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/25/1992

3a. Date of Last Report

04/21/1994

4. FEI Number

59-3128788

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

☒ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

24

Country

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

**WONG, PETER PUI SANG
7836 MOSS POINTE TRAIL EAST
JACKSONVILLE FL 32244**

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

Signature typed or printed name of registered agent and the if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DP
WONG, PETERSUI S
7836 MOSS POINTE TRAIL E
JACKSONVILLE FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**DVT
LAI, ALFRED
2000 SALT MYRTLE LANE
ORANGE PARK FL**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. 1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP
**DP
WONG, PETER PUI SANG
7836 MOSS POINTE TRAIL E
JACKSONVILLE**

☒ Change ☐ Addition

2. 1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP
**DVT
WONG, YUET KING
7836 MOSS POINTE TRAIL E
JACKSONVILLE**

☒ Change ☒ Addition

3. 1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP

☐ Change ☐ Addition

4. 1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP

☐ Change ☐ Addition

5. 1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP

☐ Change ☐ Addition

6. 1. TITLE
2. NAME
3. STREET ADDRESS
4. CITY - ST - ZIP

☐ Change ☐ Addition

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)(g), 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

Signature typed or printed name of signing officer or director

4/25/95

(904) 264-0640