FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 847260

1. Corporation Name

VAN AN CO., INC.

FILED Feb 08, 1999 8:00am **Secretary of State**

02-08-1999 90025 018 ***150.00



										I
Principal Place of Business Mailing Address						Ì				•
% C. BRENT MCCAGHREN. ESO.										
250 PARK AVE: SOUTH, BOX 880 250 PARK AVE. SOUTH, BOX 88				380			DO NOT WRITE IN THIS SPACE			
WINTER PARK FL 32790 WINTER PARK FL 32790						3. Date Incorporated or Qualifed				
							10/20/1980			}
2 Principal Pl	ace of Business	2a Maili	ng Address		-		4. FEI Number	-	App	lied For
— '	ace of Education	├ ──¬	26				58-1770396		Not	Applicable
Suite, Apt. i	# etc		Suite, Apt. #, etc.						\$8.75 A	dditional
22	, , , , ,	27	27				5. Certifcate of Status Desired Fee Required			
City & State	9		City & State				6. Election Campaign Financing \$5.00 May Be			
23		28	28				Trust Fund Contribution		Added to	Fees
Zip	Country	Zip	100				8. This corporation owes the current year Intangible			
24	25 29 30					Personal Property Tax. ☐ Yes ☐ No				
Name and Address of Current Registered Agent							10. Name and Address of New	Registered .	Agent	
(3 m) 1 (3 c)					Name)				
MCCAGHREN, C. BRENT , ESQ.				82	82 Street Address (P.O. Box Number is Not Acceptable)					
250 SOUTH PARK AVENUE , FIFTH FLOOR					The state of the s					
, ' WINTER PARK FL 32789				83	83					
				84	City				85 Zip C	ode
# 6 1504 <u>1.31</u>	VII. 2 10.7						to the same to the same to	FL	shanaina ita I	ragiotorad
Office or n	to the provisions of Sections 607.0 egistered agent, or both, in the Stam familiar with, and accept the obl	ate of Florida, Su	ch change was auth	onzea or	rine corp	d corpora poration's	ation submits this statement for the sound of directors. I hereby acc	ept the appoi	ntment as reg	istered
SIGNATURE	Signature, typed or printed name of registered	agent and title if applica	able. (NOTE: Re	gistered Age	nt signature	required w	hen reinstating)	DATE		
12. OFFICERS AND DIRECTORS 13.				13.			ADDITIONS/CHANGES TO C	FFICERS AN		
TITLE	D	<u></u>	DELETE	1.1 TITLE					Change	Addition
NAME	tseng-van lieu,david			1.2 NAME						
STREET ADDRESS	1201 GREAT EAGLE CENTRE 13			1.3 STREE	T ADDRESS	s			;	
CITY-ST-ZIP	HONG KONG			1.4 C(TY-	ST-ZIP=2550	5 V 075	- <u> </u>		<u> </u>	
TITLE	D DELETE 2.1			2.1 TITLE					Change	☐ Addition
NAME	CHEN, MADAME SHIRLEY S.L. 22 N									
STREET ADDRESS 1201 GREAT EAGLE CENTRE 2.3 ST				2.3 STREE	ET ADDRESS	s				.
CITY-ST-ZIP					ST-ZIP					
		-	DOCUETE	0.4 7777 5		i			☐ Change	Addition

6.4 CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered. CITY-ST-ZIP

3.2 NAME 3.3 STREET ADDRESS

4.1 TITLE

4. 2 NAME

51 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

☐ DELETE

□ DELETE

3.4. CITY+ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

CITY-ST-ZIP

NAME ...

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

TITLE

NAME

TITLE

NAME

YU, MR. CHENG-YUNG

300 WINSTON DR. CLIFFSIDE PARK NJ

120: 605 M.S. . .

的特殊的最

SIGNATURE REQUIRED

20/-944-0899 Daytime Phone #

☐ Change

☐ Change

Addition

☐ Addition