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

PROFIT CORPORATION ANNUAL REPORT

1999

2. Principal Place of Business

Suite, Apt. #, etc.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCL	IMEN	JT #	H10800

1. Corporation Name
FIM HOANG, INC.

(1)

FILED May 13, 1999 8:00 am Secretary of State

05-13-1999 90017 038 ***150.00

N.			
Principal Place of Bu	siness	Mailing Address	
2719 S.	ORANGE BLM	4 TRL 8249 SHAY LYNN CT	
ORLANDO	FL 32805	ORLANDO FL 32810	

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2a. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

Applied For Not Applicable

\$8.75 Additional

Fee Required

3. Date Incorporated or Qualifed 07/02/1984

59-25215756

5. Certificate of Status Desired

4. FEI Number

City & Stat	te	City & State				6. Election Campaign Financ	ng 🖂	\$5.00	May Be
		28				Trust Fund Contribution		Added t	o Fees
lip	Country 25	Zíp	30	ountry	1	This corporation owes the Personal Property Tax.	current year		□No
	9. Name and Address of Curr			\top		10. Name and Address of Ne	w Register	ed Agent	
				81	Name				
TESS:	INARI, KIM			100	\				
	S. ORANGE BLOSS	OM TRATI.		82	Street A	ddress (P.O. Box Number is Not Acc	eptable)		
	NDO FL 32805	OH IKAID		83	 				
ישמאנ	NDO 11 32003			L]				
				84	City		F	85 Zip C	Code
office or r	to the provisions of Sections 607.0 registered agent, or both, in the Stat im familiar with, and accept the obli	te of Florida. Such change	was authoriz	ed by	the corpor	orporation submits this statement for ation's board of directors. I hereby a	the purpose ccept the app	of changing its pointment as reg	registered gistered
IA LUPE	Signature, typed or printed name of registered a	gent and title if applicable.	(NOTE: Register	ed Agei	nt signature red	uired when reinstating)	DATE		
		AND DIRECTORS	1:			ADDITIONS/CHANGES TO	OFFICERS	AND DIRECTO	RS IN 12
	P	☐ DELE	TE 1.1	TITLE	$\neg \neg$			Change	Addition
	=		1.2	NAME					
ADDRESS	TESSINARI, KIM	T OCCOM MD	13	STREE	TADDRESS				
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LII	ORLANDO FL-3280	DELE		TITLE	 "			Change	Addition
		_		NAME					
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				NAME					
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i		□ DELE	'- I	NAME	. [
			l -		ADDRESS				
			■ 6.3	OIKEE	ADURESS				
I ADDRESS			ľ	CITY-S	1				

ER OR DIRECTOR

GUALURE AND TYPE FOR PRINTED NAME OF SIGNING OFFICE HOANGEK, TESSINAR