


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # L02000006568	
1. Entity Name 1ST ORIENTAL MARKET, LLC	

Principal Place of Business 5132 W. COLONIA DR. ORLANDO, FL 32808	Mailing Address 5132 W. COLONIA DR. ORLANDO, FL 32808
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DO NOT WRITE IN THIS SPACE



04272005 No Chg-LLC CR2E083 (10/03)

4. FEI Number 01-0677242	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent LIANG, BRAIN CPA 832 NORTH THORNTON AVE ORLANDO, FL 32803
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**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____


**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM JAU SO, YUE 5100 W. HIGHWAY 50 ORLANDO, FL 32808
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM PANG, WAI KUEN 7129 HIAWASSEE OVERLOOK DR ORLANDO, FL 32812
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM PANG, KUEN FAI 7129 HIAWASSEE OVERLOOK DR ORLANDO, FL 32812
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05/04/05-80024-014 50.00

**DO NOT WRITE
IN THIS SPACE**

11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:  04-25-2005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #