

2004 FOR PROFIT CORPORATION ANNUAL REPORT

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Jun 14, 2004 8:00 am
Secretary of State

05-03-2004 90656 004 ***150.00

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04012004 Chg-P CR2E034 (10/03)

DOCUMENT # P03000106846 1. Entity Name LIU DEVELOPMENT & MANAGEMENT, INC.					
Principal Place of Business 1221 E. ROBINSON STREET ORLANDO, FL 32801			Mailing Address 1221 E. ROBINSON STREET ORLANDO, FL 32801		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		4. FEI Number 20-0379201			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent FONG, DAVID 1221 E. ROBINSON STREET ORLANDO, FL 32801				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		DATE _____	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD LIU, CHENG MIN 9251 SOUTHERN BREEZE DRIVE ORLANDO, FL 32836	☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD LIU, TUN MIN 9251 SOUTHERN BREEZE DRIVE ORLANDO, FL 32836	☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	☐ Delete		☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	 	☐ Delete		☐ Change ☐ Addition	
12. 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 or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Cheng M. Liu</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date: <u>6/7/04</u> Daytime Phone #	