2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: Mei-phui Y. Le

## Jan 27, 2005 08:00 AM DOCUMENT # P95000037118 **Secretary of State** 1. Entity Name YANG KUO, INC. Mailing Address Principal Place of Business 7731 56TH ST NORTH 7731 56TH ST NORTH PINELLAS PARK FL 33781 PINELLAS PARK FL 33781 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/04) Applied For City & State 4. FEI Number City & State 65-0581380 Not Applicable Country \$8.75 Additional Country Zip Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LEE, MEI-MUI Street Address (F.O. Box Number is Not Acceptable) 7731 56TH ST N. PINELLAS PARK FL 33781 Zip Code City 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) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$150,00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. ☐ Delete DILE TITLE 01/27/05-80056-007 150.00 NAME LEE, YU-HSIANG NAME 7731 56TH STREET NORTH STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PINELLAS PARK FL 33781 CITY-ST-ZIP Change ☐ Delete HILE ☐ Addition TITLE LEE, MEI-HUI YANG NAME NAME STREET ADDRESS 7731 56TH STREET NORTH CIREET ADDRESS PINELLAS PARK FL 33781 CITY-ST-ZIP CITY ST-7IP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS SUREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP Change Addition 11116 HILE ☐ Delete NAME NAME STREET ADORESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition HILE NAME NAME. SIPEET ADDRESS STREET ADDRESS GILY - ST-7IP CITY-ST-ZIP 🗌 Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZP CHY-ST-ZIP 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.

FILED

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