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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

V71561

YEUNG CORPORATION Principal Place of Business Mailing Address 11232 PINES BLVD 11232 PINES BLVD PEMBROKE PINES FL 33026 PEMBROKE PINES FL 33026 3. Date Incorporated or Qualified 3a. Date of Last Report 10/16/1992 05/01/1995 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 21 26 65-0366185 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζıp Country Zip Country 8. This corporation has liability for intangible tax under s 199.032, 24 25 29 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name YEUNG, MAN C 62 Street Address (P.O. Box Number is Not Acceptable) 11232 PINES BLVD. PEMBROKE PINES FL 33025 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

Signature, typed or printed name of registered agent and title if applicable. NOTE: Registered Agent signature required when reinstating; DATE							
12.	OFFICERS AND DIRECTORS				O OFFICERS AND DIRECTO	FICERS AND DIRECTORS IN 12	
TIFLE	DP	☐ DELETE	1. 1 TITLE		☐ Change	☐ Addition	
NAME	YEUNG, MAN C		1.2 NAME			_	
STREET ADDRESS	1075 NE 177TH TER		1.3 STREET ADDRESS				
CITY - ST - ZIP	n miami beach fl		1.4 CITY - ST - ZIP				
TITLE	VPT	DELETE	2 1 TITLE		☐ Change	Addition	
NAME	YEUNG, DICK MAN YIN		2 2 NAME				
STREET ADDRESS	1075 NE 177 TERRACE		2 3 STREET ADDRESS				
CITY - ST - ZIP	N. MIAMI BEACH FL		24 CITY-ST-ZIP				
TITLE		☐ DELETE	3. 1 TITLE		. Change	Addition	
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NAME [6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS			ļ	
CITY-ST-ZIP			6.4 CITY - ST - ZIP			i	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 13 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF FIGNING OFFICER OR DIRECTOR VENUES 422/96 954-438-9982