2005 FOR PROFIT CORPORATION

Mar 04, 2005 8:00 am Secretary of State **ANNUAL REPORT** 03-04-2005 90087 030 ***150.00 DOCUMENT # V71561 1. Entity Name YEUNG CORPORATION 40040311 Principal Place of Business Mailing Address 11232 PINES BLVD 11232 PINES BLVD PEMBROKE PINES, FL 33026 PEMBROKE PINES, FL 33026 US US 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 03012005 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0366185 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired == == -6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent. Name YEUNG, MAN C Street Address (P.O. Box Number is Not Acceptable) 11232 PINES BLVD. PEMBROKE PINES, FL 33025 Zip Code FL 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) DATE 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. nΡ ☐ Delete TITLE ☐ Change ☐ Addition THILE YEUNG, MAN C NAME NAME 11232 PINES BLVD. STREET ADDRESS STREET ADDRESS PEMBROKE PINES, FL 33026 CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition Delete TITLE ing, Dick Man Yin YEUNG, DICK MAN YIN NAME Pines Blud 1484 BLUE JAY CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WESTON, FL 33327 CITY-ST-7IP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7(P ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Change Addition TITLE ☐ Detete NAME

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.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

Man Chema

FILED