Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90095 011 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **V66309**

MOUNTA	AIN (USA) CORP.							
Principal Place of Business Mailing Address					\$ 100% to Describe and a section retrieve to	Mit DIEN GLAN HIGH EIGH A	10013 05031 1001	
391 E. COMMERCIAL BLVD.  TT. LAUDERDALE FL 33334  391 E. COMMERCIAL BLVD.  FT. LAUDERDALE FL 33334  FT. LAUDERDALE FL 33334					00 107 14707			
					DO NOT WRITE	IN THIS SPACE		
					3. Date Incorporated or Qualifed 09/21/1992			
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	<del>}</del>	plied For	
1 26					65-0358998		ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 / Fee Re		
City & Stat	ity & State City & State		_		Election Campaign Financing     Trust Fund Contribution	\$5.00 Added to		
Zip 24	Country Zip Cou		Country	,	This corporation owes the current     Personal Property Tax.	year Intangible  [K] Yes	□No	
	9. Name and Address of Current		<u>~</u>		10. Name and Address of New Reg	istered Agent		
	4. 114111		81	Name		•		
CHOI, YUK YIP 391 E. COMMERCIAL BLVD.			82	Street Addre	Address (P.O. Box Number is Not Acceptable)			
	LAUDERDALE FL 33334		83					
			84	City		FL 85 Zip (	Code	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State or m familiar with, and accept the obligati Signature, typed or printed name of registered agent	of Florida. Such change was autions of, Section 607.0505, Florid	thorized by da Statutes	the corporatio	oration submits this statement for the pun's board of directors. I hereby accept the statement of the punch o	rpose of changing its ne appointment as re	gistered	
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.		ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTO	DRS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE		P		Addition	
NAME			1.2 NAME				Ì	
STREET ADDRESS			1.3 STREE	T ADDRESS				
CITY-ST-ZIP			1.4 CITY- S	T-ZIP				
TITLE			2.1 TITLE			☐ Change	Addition	
NAME			2.2 NAME					
STREET ADDRESS	RESS 2.3 S		2.3 STREE	TADORESS			<b>,</b>	
CITY-ST-ZIP	2.40		2.4 CITY-5	ST-ZIP				
TITLE	☐ DELETE 3.1 T		3.1 TITLE			Change	☐ Addition	
NAME			3.2 NAME			•	Į	
STREET ADDRESS			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				
TITLE	☐ DELETE 4.11		4.1 TITLE			Change	☐ Addition	
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-ST-ZIP	4.4 Ci		4.4 CiTY-S	T-ZIP				
TITLE		☐ DELETE 5.11		1	,	Change	☐ Addition	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	T ADDRESS				
CITY-ST-ZIP			5.4 CITY- S	T-ZIP				
TITLE DELETE 6.1 TIT						Change	Addition	
NAME			6.2 NAME				J	

14. 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 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

(954)493-5316