

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004 8:00 am
Secretary of State

03-01-2004 90034 028 ***150.00

DOCUMENT # 435105

1. Entity Name
ALDO INVESTMENT CO.



Principal Place of Business
**1245 LINCOLN RD
MIAMI BEACH, FL 33139 US**

Mailing Address
**1245 LINCOLN RD
MIAMI BEACH, FL 33139 US**

2. Principal Place of Business
1245 Lincoln Road

3. Mailing Address
1245 Lincoln Road

Suite, Apt. #, etc.
N/A

City & State
MIAMI BEACH, FLORIDA

Zip
33139

Country
US



02122004 Chg-P CR2E034 (10/03)

4. FEI Number
59-1760663

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**LAI, COSMO
1245 LINCOLN ROAD
MIAMI BEACH, FL 33139**

7. Name and Address of New Registered Agent

Name
PAUL A. LAI

Street Address (P.O. Box Number is Not Acceptable)
1245 Lincoln Road

City
MIAMI BEACH

City
FL Zip Code
33139

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

2/11/04

**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**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Delete
PD	LAI, COSMO	1245 LINCOLN RD	MIAMI BEACH, FL 33139	<input checked="" type="checkbox"/>
SDT	LAI, OI YUET	1245 LINCOLN RD	MIAMI BEACH, FL 33139	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
PD	PAUL A. LAI	1245 Lincoln Road	MIAMI BEACH, FLORIDA 33139	<input type="checkbox"/>	<input checked="" type="checkbox"/>
SD	RUN ZHY LAI	1245 Lincoln Road	MIAMI BEACH, FLORIDA 33139	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/04

Date

(305) 672-8822

Daytime Phone #