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

NAME

STREET ADDRESS

CITY-ST-ZIP

FILED Feb 23 1998 8:00am **PROFIT** H ORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # 548235 (1)WON LEE, INC. Principal Place of Business Mailing Address 1329 N WOODLAND BLVD. 1329 N WOODLAND BLVD. DELAND FL 32720 DELAND FL 32720 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/03/1977 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 59-1775989 Suite, Apt. #. etc. Suite, Apl. #, etc. \$8.75 Additional \Box 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 8. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 25 Personal Property Tax due June 30. Yes 24 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name POON, SEAMUS 1329 N WOODLAND BLVD 82 Street Address (P.O. Box Number is Not Acceptable) DELAND, FL 83 32720 84 City Zip Code 85 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 (NOTE_Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Спапре Addition 11 TITLE TITLE POON, SEAMUS 1.2 NAME NAME 1329 N WOODLAND BLVD 1.3 STREET ADDRESS STREET ADDRESS DELAND, FL 00000 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETÉ Change Addition TITLE 2.1 TiTLE Œ NAME WU. KUCK LING 2.2 NAME 1329 N WOODLAND BLVD 2.3 STREET ADDRESS STREET ADDRESS DELAND, FL 00000 CITY-ST-ZIP 2 4 CITY-ST-7IP DELFTE Change Addition 31 TITLE TITLE LEE, WM K K 32 NAME NAME 1329 N WOODLAND BLVD 3.3 STREET ADDRESS STREET ADDRESS DELAND, FL 00000 3.4. CITY - ST - ZIP CITY-ST-ZIP Addition DELFTE Change 4.1 THILE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP Change Addition DELETE 51 TRUE TITLE 52 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE

14. Thereby 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 suppliemental 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 recovery or trustness appropriate 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 affinishment with an address SEAMUS FOON 2/15/98 SIGNATURE:

6.2 NAME

6.3 STREET ADDRESS