

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 620577 (7)
1. Corporation Name
YEH INVESTMENTS, INC.



Principal Place of Business Mailing Address
7204 N.W. 79TH TERR. 7204 N.W. 79TH TERR.
MIAMI FL 33166-2210 MIAMI FL 33166-2210

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/08/1979		3a. Date of Last Report 06/15/1995	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-1917294		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No			

9. Name and Address of Current Registered Agent

FIALLO, ARMANDO
~~7485 FAIRWAY DR APT #422~~
MIAMI LAKES FL 33014

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
7204 N.W. 79th Ter.
83
84 City Miami FL 85 Zip Code 33166

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

Signature, type or printed name of registered agent and title (Applicable)

(to BE Registered Agent's signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	☐ DELETE		11 TITLE		☐ Change ☐ Addition	
NAME	YIP, BERNARD			12 NAME			
STREET ADDRESS	7204 N.W. 79 TERRACE			13 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			14 CITY-ST-ZIP			
TITLE	STD	☐ DELETE		21 TITLE		☒ Change ☐ Addition	
NAME	FIALLO, ARMANDO			22 NAME			
STREET ADDRESS	7485 FAIRWAY DR APT #422			23 STREET ADDRESS	7204 N.W. 79th Ter.		
CITY-ST-ZIP	MIAMI LAKES FL			24 CITY-ST-ZIP	Miami, Fla. 33166	☐ Change ☐ Addition	
TITLE		☐ DELETE		31 TITLE			
NAME				32 NAME			
STREET ADDRESS				33 STREET ADDRESS			
CITY-ST-ZIP				34 CITY-ST-ZIP			
TITLE		☐ DELETE		41 TITLE		☐ Change ☐ Addition	
NAME				42 NAME			
STREET ADDRESS				43 STREET ADDRESS			
CITY-ST-ZIP				44 CITY-ST-ZIP			
TITLE		☐ DELETE		51 TITLE		☐ Change ☐ Addition	
NAME				52 NAME			
STREET ADDRESS				53 STREET ADDRESS			
CITY-ST-ZIP				54 CITY-ST-ZIP			
TITLE		☐ DELETE		61 TITLE		☐ Change ☐ Addition	
NAME				62 NAME			
STREET ADDRESS				63 STREET ADDRESS			
CITY-ST-ZIP				64 CITY-ST-ZIP			

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 617, 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 SIGNING OFFICER OR DIRECTOR

STD-Armando Fiallo 6/17/96 (305)884-3724

CR2E034 (3/96)