

FILED
Feb 21, 2000 8:00 am
Secretary of State

02-21-2000 90015 016 ***150.00

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DO NOT WRITE IN THIS SPACE

DOCUMENT # F58342	
1. Entity Name	
CYC INVESTMENTS LTD., INC.	
<hr/>	
Principal Place of Business	Mailing Address
CHARLES CHAU	C/O CHARLES CHAU
88TH ST.	34-24 88TH ST.
JACKSON HEIGHTS NY 11372	JACKSON HEIGHTS NY 11372-3439

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number	22-2383177	Applied For
		Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent	
STEINBERG, CHARLES L., ESQ. KEY CENTER SOUTH 2869 SOUTH DELANEY AVE. ORLANDO FL 32806	Name	
	Street Address (P.O. Box Number is Not Acceptable)	
	City	FL Zip Code

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.

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

<p>9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/></p>	<p>FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State</p>	<p>10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees</p>
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OFFICERS AND DIRECTORS		12.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
HOI SANG YEUNG		NAME		
1525 CALAIS DR.		STREET ADDRESS		
MIAMI BEACH FL		CITY - ST - ZIP		
STD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
CHAU, CHARLES		NAME		
34-24 88TH ST.		STREET ADDRESS		
JACKSON HEIGHTS NY		CITY - ST - ZIP		
V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
CHAU, PO LEANG		NAME		
34-24 88TH ST.		STREET ADDRESS		
JACKSON HEIGHTS NY		CITY - ST - ZIP		
VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
CHEE MING CHAN		NAME		
49 MT. DAVIS RD.		STREET ADDRESS		
HONG KONG		CITY - ST - ZIP		
	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		NAME		
		STREET ADDRESS		
		CITY - ST - ZIP		
	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		NAME		
		STREET ADDRESS		
		CITY - ST - ZIP		

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 11 or Block 12 if changed, or on an attachment with an address, with all other likely empowered.

SIGNATURE: Charles Chau 2/14/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

Date _____

Daytime Phone #

CR2E034 (9/99)