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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G07485

Country

9. Name and Address of Current Registered Agent

(7)

1198 SOUTH PASADENA AVE.

ST. PETERSBURG FL 33707

2a. Mailing Address

City & State

Suite, Apt. #, etc.

CHANG & MING, INC.

1198 SOUTH PASADENA AVE.

ST. PETERSBURG FL 33707

2. Principal Place of Business

MACH, VO HUYEN

1198 SO. PASADENA AVENUE

Suite, Apt. #, etc.

SIGNATURE:

City & State

21

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Principal Place of Business Mailing Address % PING YUANG % PING YUANG

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FILED Feb 03 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□ No

☐ Yes

Not Applicable

3. Date Incorporated or Qualified

11/08/1982 4. FEI Number

59-2233254

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

10. Name and Address of New Registered Agent

Trust Fund Contribution

| | | | 82 | 2 Street Address (P.O. Box Number is Not Acceptable) | | | |
|--|-----------------------|------------|----------------|--|---|----------|--|
| ST. PETERSBURG FL 33707 | | | 83 | | <u> </u> | \dashv | |
| | | |] | | | 1 | |
| | | | 84 | City | FL 85 Zip Code | 7 | |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the abo | | | | e-name | ged 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, typed or printed name of registered agent and title if applicable. (NOTE, Registered A | | | | nt signat | ature required when reinstating) DATE | 1 | |
| 12. | OFFICERS AND DIRECTOR | | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |] | |
| TITLE | PD | DELETE | 1.1 TITLE | | Change | 13 | |
| NAME | MACH, VO HUYEN | | 1.2 NAME | | | 1; | |
| STREET ADDRESS | 3201 65 WAY NO. | | 1.3 STREET | ADDRES | SS | 8 | |
| CITY-ST-ZIP | ST PETERSBURG FL | | 1.4 CITY - S | T-ZIP | | _[6 | |
| TITLE | STD | ☐ DELETE | 2.1 TITLE | | Change Addition | 19 | |
| NAME | MACH, LAN | | 2.2 NAME | | | 1 | |
| STREET ADDRESS | 1198 S. PASADENA AVE. | | 2.3 STREET | ADDRES | ss | | |
| CITY-ST-ZIP | ST PETERSBURG FL | | 2. 4 CITY - S | T-ZiP | | _] | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | Change Addition | | |
| NAME | • | | 3.2 NAME | | | | |
| STREET ADDRESS | | | 3.3 STREET | ADDRES: | ss | Ì | |
| CITY-ST-ZIP | | | 3.4. CITY - S | T-ZIP | | | |
| TITLE | | DELETE | 4.1 TITLE | | Change Addition | 7 | |
| NAME | | | 4. 2 NAME | | | | |
| STREET ADDRESS | | | 4.3 STREET | AODRES: | SS | | |
| CITY-ST-ZIP | | | 4.4 CtTY - S1 | r- <i>z</i> iP | | | |
| TITLE | • | ☐ DELETE . | 5.1 TITLE | | Change Addition | 1 | |
| NAME | | | 5.2 NAME | | | | |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS | ss | ĺ | |
| CITY - ST - ZIP | | | 5.4 CITY - ST | Γ- <u>ΖΙ</u> Ρ | | 1 | |
| TITLE | | DELETE | 6.1 TITLE | | Change Addition | ı | |
| NAME | | | 6.2 NAME | | | ļ | |
| STREET ADDRESS | | | 6.3 STREET | ADDRESS | SS | | |
| CiTY - ST - ZiP | | | 6.4 CITY - \$1 | | <u> </u> | | |
| 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 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address | | | | | | | |

Country

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