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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # J82443

MANSING SUBS, INC.

FILED Feb 02, 1999 8:00am **Secretary of State**

02-02-1999 90007 024 ***150.00



| Principal Place | e of Business | Mailing Address | | | | - E LOURING GION JOING NEWS DIDIN GLOOD IRIN ALAN | | |
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| | | 4374 W. NORTHLAKE BLVI | n . | | | · | | |
| 4374 W. NORTHLAKE BLVD. 4374 W. NORTHLAKE BLVI Palm Beach Gardens Fl 33410 Palm Beach Gardens F | | | | 410 | | | | |
| THEM DENOTES | OFFICE TE SOFFICE | THEM DENOT CHARGETO | _ 00110 | | | DO NOT WRITE IN TH | IS SPACE | |
| | | | | | | 3. Date Incorporated or Qualifed | | |
| | | | | | | 07/14/1987 | | |
| 2. Principal P | lace of Business | 2a. Mailing Address | | | · · | 4, FEI Number | | Applied For |
| 21 26 | | 26 | | | 59-2829797 | | Not Applicable | |
| Suite, Apt. | # etc. | Suite, Apt. #, etc. | | | | | | Additional |
| 22 | | 27 | | | | 5. Certifcate of Status Desired | | Required |
| City & Stat | e | City & State | | | | 6, Election Campaign Financing | \$5.0 | 0 May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | d to Fees |
| Zip | Country | Zip | Cou | intry | | 8. This corporation owes the current year I | | |
| 24 | [25] | 29 | 30 | , | | Personal Property Tax. | Yes | □No |
| 24 | 9. Name and Address of Current | - | 190 | | | 10. Name and Address of New Registere | | |
| | 3. Name and Address Of Our City | g | | 81 | Name | | | |
| LEE. | TSUN YAN | • | | \sqcup | | | • | |
| 4374 | W NORTHLAKE BLVD | • | * | 82 | Street Addres | ss (P.O. Box Number is Not Acceptable) | | |
| | M BEACH GARDENS FL 33410-32 | 54 | | 83 | , | 20 1 20 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 | 1 2 gri 2(gr. 2)2 | |
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| | | | | 84 | City | <u> </u> | 85 Zi | p Code |
| 11 Pursuant | to the provisions of Sections 607.0502 | and 607.1508. Florida Statut | es. the a | bove | -named corpor | ration submits this statement for the purpose | of changing | its registered |
| office or r | egistered agent, or both, in the State of | f Florida. Such change was a | uthorized | 1 by t | the corporation | 's board of directors. I hereby accept the app | ointment as | registered |
| agent. i a | m familiar with, and accept the obligation | ons of, Section 607.0505, Fig | nda Siai | utes. | | | | |
| SIGNATURE | Slengture band or printed name of registered quest | and title if analicable (NOTE | · Panietarad | Agent | signature required v | when reinstating) / DATE | | · |
| | | | | LABOUR | | arter following) | • | |
| 12 | OFFICERS AND | | _ | | • | ADDITIONS/CHANGES TO OFFICERS | AND DIREC | TORS IN 12 |
| 12. | rm | DIRECTORS | 13. | TLE | . | ADDITIONS/CHANGES TO OFFICERS / | AND DIREC | |
| TITLE | D | | 13. | | | ADDITIONS/CHANGES TO OFFICERS A | | |
| TITLE NAME | D Lee, tsun yan | DIRECTORS | 13. 1.1 TF 1.2 N/ | AME | | ADDITIONS/CHANGES TO OFFICERS | | |
| NAME STREET ADDRESS | D LEE, TSUN YAN 10217 FLAG DR. | DIRECTORS | 13. 1.1 TI 1.2 N/ 1.3 S1 | AME TREET | ADDRESS | ADDITIONS/CHANGES TO OFFICERS | | |
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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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.