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Mar 20 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **J89585** (0)
1. Corporation Name
ALLIED GIFT AND SHIPPING, INCORPORATED

Principal Place of Business
**6807 VISITOR CIRCLE SUITE EF
ORLANDO FL 32819**

Mailing Address
**6807 VISITOR CIRCLE SUITE EF
ORLANDO FL 32819-8270**



2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

08/25/1987

3a. Date of Last Report

03/28/1996

4. FEI Number

59-2844434

Applied for

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒ Yes

☐ No

10. Name and Address of New Registered Agent

**NGUYEN, MAN
6807 VISITOR CIRCLE S.E.
SUITE 108
ORLANDO FL 32819**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 of the principal officer or registered agent, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE

DP

☐ DELETE

NAME

NGUYEN, MAN

STREET ADDRESS

6807 VISITOR CIRCLE S.E.

CITY-STATE-ZIP

ORLANDO FL

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

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