FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

KEEDEE

1. Corporat	AN CHEN,		<i>)</i>	<i>(</i> '		† (88)2011 BIO 62112 BION 801	i (((8) p) (1 6) (1	1 21211 812 14 8	i (616 62611 \$161 11 1881	
Principal Pla	ice of Business		Molino Adding							
Principal Place of Business # DUAN CHEN 270 S. STATE RCIAD #7 (441) HOLLYWOOD FL 33023 # Mailing Address # DUAN CHEN 270 S. STATE ROAL HOLLYWOOD FL 33023										
						 Date Incorporated or Qualifie 02/16/1989 	d 3a. Da	te of Last F 06/29/1		
21	Place of Busin	ess	2a. Mailing Address 26		4. FEI Number 65-0096003	Applied For Not Applicable				
Suite, Apt			Suite, Apt. #, etc.		5. Certificate of Status Desired		\$8.75 Additional			
City & Sta	ate		City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be		
Ζφ 24		Country 25	Zip 29	Count	ry	8. This corporation has liability t	8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No			
	g, Name	and Address of Currer	nt Registered Agent	8		10. Name and Address of New		Agent	_	
CHE	CUEN MIAN					ne				
Chen, Duan % One Hour Super Photo				8	82 Street Address (P.O. Box Number is Not Acceptable)					
270 SOUTH STATE ROAD #7 (441)					3					
HOLL	HOLLYWOOD FL 33023				\$ City					
44 5				1	1 - 7		FL		p Code	
or registe familiar w	ered agent, or vith, and accep	both, in the State of Florid of the obligations of, Secti	da. Such change was authorion 607.0505, Florida Statu	tutes, trie above orized by the cor tes.	-named co poration's	orporation submits this statement for the a s board of directors. I hereby accept the a	ourpose of chappointment as	anging its r registered	registered office I agent. I am	
SIGNATURE	Signature, typed o	or printed name of registe ed agent	and title if appicable	(NOTE: Registered Ap	ont signature r	required when reinstating)	DATE			
12.	OFFICERS AND DIF		DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			PRS IN 12		
TITLE NAME	PD	DUAN	☐ DELETE	1. 1 TITLE				Change	Addition	
STREET ADDRESS		, DOAN . STATE RD #7 (441)		1.2 NAME						
CITY-ST-ZIP		WOOD FL		l l	T ADDRESS					
TITLE	VD		☐ DELETE	1.4 CITY- 2 1 TITLE				7 06		
NAME	YANG,	CHENG-HUAN	—	2.2 NAME			L	Change	☐ Addition	
STREET ADORESS	3217 [OOLPHIN DRIVE			T ADDRESS					
CHIY-ST-ZIP	MiRAM	IAR FL		2.4 CITY-						
TIFLE	W		DELETE	3. 1 TITLE			r	Change	Addition	
NAME	BRQO	KS, CHING-YANG		32 NAME	1		_			
STREET ADDRESS		ELTON ROAD		3.3. STREE	T ADDRESS					
CHTY - ST - ZIP	AMADIS	UN AL		3.4 C(TY-	ST-ZIP					
TITLE Nakes	1		☐ DELETE	4. 1 TITLE	Ţ			Change	Addition	
NAME Street address				4 2 NAME	J				j	
CITY-ST-ZIP					ADDRESS					
TITLE	 		DELETE	4.4 CITY-	T-ZIP					
NAME	}			5. 1 TITLE] Change	☐ Addition	
STREET ADDRESS				5.2 NAME	1000000				1	
CITY - ST - ZIP				5.3 STREET					ŀ	
TITLE			DELETE	5.4 City - 5 6. 1 Title	1-212			T Charry		
NAME				6.2 NAME	ŀ		L] Change	Addition	
STREET ADDRESS				6.3 STREET	ADDRESS					
	1			D.0 0 (C.)						

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE: V

DATE TORAN CHEN & 4/20/66 & 954966 416R