2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State
05-02-2005 90103 034 ****50.00

DOCUMENT # L04000045449

1. Entity Name
QUANG OF ORLANDO, LLC

Principal Place of Business	Mailing Address
7143 SOMERSWORTH DRIVE ORLANDO, FL 32835	7143 SOMERSWORTH DRIVE ORLANDO, FL 32835

03092005 Chg-LLC CR2E083 (10/03)

2. Principal Place of Business	3. Mailing Address
950 N. Westmoreland Dr	PO Box 547187
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: ORLANDO FL	City & State: ORLANDO FL
Zip: 32804 Country: ORANGE	Zip: 32806 Country: ORANGE

4. FEI Number: 65-1230169 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
QUANG, KENNETH CHI TU 7143 SOMERSWORTH DRIVE ORLANDO, FL 32835	Name: Quang, Kenneth Chi Tu Street Address (P.O. Box Number is Not Acceptable): 950 N. Westmoreland Dr. City: ORLANDO FL Zip Code: 32804

8. 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. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE: Quang 04/20/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by May 1, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS			10. ADDITIONS / CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR QUNAG, KENNETH CHI TU 7143 SOMERSWORTH DRIVE ORLANDO, FL 32835	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR Quang, Kenneth Chi Tu 950 N. Westmoreland DR. ORLANDO, Fl 32804	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR QUANG, VON NGO 7143 SOMERSWORTH DRIVE ORLANDO, FL 32835	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	mgr Quang, Von Ngo 950 N. Westmoreland DR. ORL, Fl 32804	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Quang KENNETH CHI TU QUANG 04/20/05 (407) 816-3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #