


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 08, 2007 8:00 am**  
**Secretary of State**

08-08-2007 90067 034 \*\*\*150.00

<b>DOCUMENT # P00000021317</b> 1. Entity Name <b>HOUSE OF YAN &amp; CHEN, INC.</b>					
Principal Place of Business <b>1351 A ST LUCIE BLVD WEST PORT SAINT LUCIE, FL 34986</b>			Mailing Address <b>MING F. CHEN 1351 A ST LUCIE BLVD WEST PORT SAINT LUCIE, FL 34986</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>CHEN, MING FENG 1351 A ST LUCIE BLVD WEST PORT SAINT LUCIE, FL 34986</b>				Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;"><b>FL</b></span> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>CHEN, MING FENG</b> <b>5496 NW EVANSTON AVE</b> <b>PORT SAINT LUCIE, FL 34983</b> <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD <b>CHEN, YUK Y</b> <b>5496 NW EVANSTON AVE</b> <b>PORT SAINT LUCIE, FL 34983</b> <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <u><i>Yuk Y Chen</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				<u>8/5/07</u> <small>Date</small>	
<small>Daytime Phone #</small>					



08052007 Chg-P CR2E034 (12/06)

4. FEI Number **65-0994023** Applied For Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**