2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Apr 08, 2005 08:00 AM Secretary of State **DOCUMENT # P00000075136** YON LEE BROTHERS, INC. Principal Place of Business Mailing Address 7847 N.W. 53RD STREET 7847 N.W. 53RD STREET MIAMI, FL 33166 MIAMI, FL 33166 CR2E034 (10/03) 03112005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1031113 Not Applicable \$8.75 Additional 5. Certificate of Status Desired П 6. Name and Address of Current Registered Agent YON LEE, MARIO JOAQUIN DO NOT WRITE **7847 N.W. 53RD STREET** MIAMI, FL 33166 IN THIS SPACE . 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE. Registered Agent algoriture required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE YON LEE, MARIO JOAQUIN NAME STREET ADDRESS 7847 N.W. 53RD STREET U00000293970 CiTY-ST-ZIP MIAMI, FL 33166 04/08/05-80048-022 158.75 DILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP nne NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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 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.

YPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-11-2006

FILED