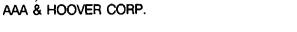
2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

P00000081218 **DOCUMENT #**

1. Entity Name





FILED Jan 06, 2003 8:00 am Secretary of State 01-06-2003 90053 013 ***150.00

| | | | | \$ 1.00 m | | | | |
|--|--|--|------------------|---|--|----------------------------|-------------------------------|--|
| Principal Place of Business 7130 S. OBT SUITE 125 ORLANDO PL 32809 | | Mailing Address 7130 S. OBT SUFFE 125 ORLANDO FL 32809 | | | | | | |
| 2. Principal Pl | ace of Business OAKRIOCE R.D. | 3. Mailing Addre | SAME | | # # ################################## | S BRIST FOIDT INTO THE OUT | DEL PLEME I DEF LOUE | |
| Suite, Apt. | | Suite, Apt. #, etc. | | | CHECK HERE IF MAKING CHANGES | | | |
| City & State | | City & State | | | 4. FEI Number 59-3668853 | | Applied For Not Applicable | |
| Zip 378 | Country | Zip - | Cou | ntry | 5. Certificate of Status Desired | Fee Requ | Additional uired | |
| | 6. Name and Address of Current | Registered Agent | · | Nome | 7. Name and Address of New R | egistered Agent | | |
| | | | | Name | | | | |
| YAP, HOO | | | Street Address | | (P.O. Box Number is Not Acceptable) | | | |
| -8950 KIAW ORLANDO | | | | | | | | |
| • | | | | City | | FL Zip C | | |
| | named entity submits this statement fi | or the purpose of ch | | red office or regist | ered agent, or both, in the State of Flo | rida. 1 am familiar w | ith, and accept | |
| SIGNATURE . | Signature, typed or printed name of registered agen | t and (tie)if applicable. | | red Agent signature requir | , | DATE | | |
| After | ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.00 c Payable to Florida Department of | | | | S. Election Campaign Fir Trust Fund Contribution | | 5.00 May Be Ided to Fees | |
| 10. | OFFICERS AND | | 11 | | ADDITIONS/CHANGES TO OFF | ICERS AND DIRECT | ORS IN 11 | |
| TITLE NAME | DPST YAP, HOOVER | | | LE ME | | ☐ Chan | ge 🔲 Addition | |
| STREET ADDRESS CITY-ST-ZIP | 3950 KIAWA DRIVE ORLANDO FL 32837 | | 1 | REET ADDRESS TY-ST-ZIP | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | NA ST | LE ME REET ADDRESS IY-ST-ZIP | | ☐ Chan | ge Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | 0 | NA ST | ILE ME REET ADDRESS TY-ST-ZIP | | ☐ Chan | ge Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | NA ST | TLE AME REET ADDRESS TY-ST-ZIP | | ☐ Chan | ge Addition | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | NA ST | TLE AME REET ADDRESS TY-ST-ZIP | | ☐ Chan | nge | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | : .: | NA ' ST | TLE MME REET ADDRESS TY-ST-ZIP | | ☐ Chan | nge Addition | |
| indicated | | is true and accurate nowered to execute | and that my sign | | Section 119.07(3)(i), Florida Statutes, he same legal effect as if made under 607, Florida Statutes; and that my nam | | | |

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR