


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**May 19, 2005 8:00 am**  
**Secretary of State**

04-18-2005 90553 036 \*\*\*100.00  
05-19-2005 90047 017 \*\*\*\*\*50.00

<b>DOCUMENT # P01000086681</b> 1. Entity Name <b>UPPER RIGHT COMPANY</b>	
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Principal Place of Business <b>10250 SW 56ST D 202 MIAMI, FL 33182</b>	Mailing Address <b>10250 SW 56ST D 202 MIAMI, FL 33182</b>
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**DO NOT WRITE IN THIS SPACE**



**50052934**

01052005 No Chg-P CR2E034 (10/03)

4. FEI Number <b>65-1143046</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

8. Name and Address of Current Registered Agent  
**YEN, CHEN LI  
13622 NW 9 LN  
MIAMI, FL 33182**

**DO NOT WRITE  
IN THIS SPACE**

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 reappointing) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PD CHEN, LI-YEN 13622 NW 9 LN MIAMI, FL 33182</b>
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IN THIS SPACE**

12. 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 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.

**SIGNATURE: X LI-YEN CHEN**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**11/9/05**  
Date

Daytime Phone #