


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 19, 2004 8:00 am
Secretary of State


04-19-2004 90315 042 ***150.00

DOCUMENT # P01000116292	
1. Entity Name MODERN RUBY COMPANY	

Principal Place of Business 5901 CLYDESDALE PLACE ORLANDO, FL 32822 <i>5903. CLYDESDALE PLACE</i>	Mailing Address 5901 CLYDESDALE PLACE ORLANDO, FL 32822 <i>5903. CLYDESDALE PLACE</i>
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94056453



01192004 No Chg-P CR2E034 (10/03)

4. FEI Number 59-3758215	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

WIN, AUNG KYAW
~~5901 CLYDESDALE PLACE~~
ORLANDO, FL 32822
5903. CLYDESDALE PLACE
ORLANDO, FL-32822

**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: *[Signature]* DATE: 04/14/04

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 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	P WIN, AUNG KYAW 5901 CLYDESDALE PLACE <i>5903. CLYDESDALE PLACE</i> ORLANDO, FL 32822 <i>ORLANDO, FL-32822</i>
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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: *[Signature]* DATE: 04/14/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR