

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 05, 2004 8:00 am**  
**Secretary of State**

04-05-2004 90062 031 \*\*\*150.00



DOCUMENT # P01000122434

1. Entity Name  
 COEYE INC.

Principal Place of Business  
 2025 WEST HARMEN AVE.  
 MELBOURNE, FL 32904

Mailing Address  
 2025 WEST HARMEN AVE.  
 MELBOURNE, FL 32904

2. Principal Place of Business  
 2025 West New Haven Ave.  
 Suite, Apt. #, etc.

3. Mailing Address  
 2025 West New Haven Ave.  
 Suite, Apt. #, etc.

City & State  
 West Melbourne  
 Zip  
 32904  
 Country  
 Brevard

City & State  
 West Melbourne  
 Zip  
 32904  
 Country  
 Brevard



02032004 Chg-P CR2E034 (10/03)

4. FEI Number  
 90-0002344  
 Applied For  
 Not Applicable

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

6. Name and Address of Current Registered Agent  
 CHEN, JUNGLIN  
 1755 N. HIGHWAY A1A #601  
 INDIALANTIC, FL 32903

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City  
 FL 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 V. P. Shu-Ching Chen 4/11/04  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**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 CHEN, JUNGLIN 1755 N. HWY A1A #601 INDIALANTIC, FL 32903 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V CHEN, SHUCHING 1755 N. HWY A1A #601 INDIALANTIC, FL 32903 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHEN, YINGTA 1755 N. HWY A1A #601 INDIALANTIC, FL 32903 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CHEN, YUNG CHOU 1755 N. HWY A1A #601 INDIALANTIC, FL 32903 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: V. P. Shu-Ching Chen 4/11/04 321-543-2219  
Signature and typed or printed name of signing officer or director Date Daytime Phone #