2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED Apr 30, 2004 8:00 am Secretary of State

ANNUAL KEPUKI (AK)				4/16	Secretary of Sta	te	
DOCUMENT # P02000115241 1. Entity Name					04-16-2004 90122 026 ***150.0		
MSKY INVESTMENT PROPERTIES, INC.							
			V.	5/			
Principal Place of Business Mailing Address							
19421 NW 6TH ST.		19421 NW 6TH ST.]			
PEMBROKE	PINES FL 33029	PEMBROKE PINES FL 3	33029		ا به المحمد ا المحمد المحمد المحم		
					HANDER OF BOUND HER BOUND FROM BOTH BOTH TO SEE THE BOTH FOR THE BOTH FROM THE BOTH HAND BOTH HER BOTH HE BOTH HER BOTH HE BOTH HER BOTH HE BOTH HER BOTH HE BOTH HER BOTH HER BOTH HER BOTH HER BOTH HER BOTH HE		
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			MOORE CR2E034 (11/03)		
City & State		City & State		4. FE	75-3086835 CARREST Not Applied		
Zip	Country	Zip	Country	5. Ce	rtificate of Status Desired	al .	
	6. Name and Address of Current	Registered Agent		7. Na	me and Address of New Registered Agent		
Name.				•·-	و از العاقم في الرائد في المنظم ا المنظم المنظم		
YEUNG, YUK SUM 19421 NW 6TH ST. Street Address (ress (P.O. Bo	(Number is Not Acceptable)			
	ABROKE PINES FL 33029		ļ <u></u>				
	in the state of th						
ė,	3 ()		City		FL Zip Code		
		or the purpose of changing its	registered office or re	gistered ager	nt, or both, in the State of Florida. I am familiar with, and a	accept	
the obligat	tions of registered agent.						
SIGNATURE.					Sahno) DATE		
ole de forment of co	Signature, typed or printed name of registered agent	and tide if applicable. (NOTE	: Registered Agent Signature	required when teins	DATE		
	ILE NOW!!! FEE IS \$150.00 ir May 1, 2004 Fee will be \$550.00			1	9. Election Campaign Financing \$5.00 Ma		
	k Payable to Florida Department o	1 State		ļ	Trust Fund Contribution. Added to Fi	ees	
10.	OFFICERS AND	DIRECTORS	11.	ADD	ITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	11	
TITLE	PD /	Delete	TITLE		☐ Change ☐	Addition	
STREET AODRESS	YEUNG, YUK SUM 19421 NW 6TH ST.		NAME CTREET ADDRESS				
CITY-ST-ZIP	PEMBROKE PINES FL 33029		STREET ADDRESS CITY-ST-ZIP				
TITLE	VD	☐ Delete	TITLE		☐ Change ☐	Addition	
NAME	CARMEN, MARIA D		NAME				
STREET ADDRESS			STREET ADORESS				
CITY-ST-ZIP	PEMBROKE PINES FL 33029		CITY-SI-ZIP			4.400	
j.	SD ALAN, SANTIAGO	Celete	TITLE	service of the	Change Change	Addition	
STREET ADDRESS	19421 NW 6TH ST.		STREET ADDRESS			,	
CITY-ST-ZIP	PEMBROKE PINES FL 33029		CITY-ST-ZIP			_	
BILE	TD KANA ELINIC	☐ Delete	TITLE		Change	Addition	
NAME STREET ADDRESS	CHENG, KAM FUNG 19421 NW 6TH ST.		NAME STREET ADORESS				
CITY-S1-ZIP	PEMBROKE PINES FL 33029	•	CITY-ST-ZIP			•	
TITLE		☐ Delete	TITLE		☐ Change ☐	Addition	
NAME	1 .		NAME			1	
STREET ADDRESS			STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP		[] Change []	Addition	
TITLE		Delete	TITLE		☐ Change ☐	Addition	
STREET ADDRESS]		STREET ADDRESS				
CITY-ST-ZIP			CITY-ST-ZIP		<u> </u>		
12. I hereby	certify that the information supplied with	h this filing does not qualify for	r the exemption stated	d in Section 1	9.07(3)(i), Florida Statutes, I further certify that the inform	nation	
12. I hereby indicated of the co	certify that the information supplied with d on this report or supplemental report in portation or the receiver or trastee emp	h this filing does not qualify for s true and accurate and that befored to execute this report	r the exemption stated my signature shall hav as required by Chap	d in Section 1° re the same le ter 607, Florid	(9.07(3)(i), Florida Statutes. I further certify that the inform gal effect as if made under cath; that I am an officer or dia Statutes; and that my name appears in Block 10 or Block.	nation irector ck 11 if	

SIGNATURE:

YukSum Yeun

4/26/0

04 (954)614-767

pate Daylime Phone