FILED
Aug 22, 2007 8:00 am
Secretary of State
08-06-2007 90033 044 ***150.00

8/

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000152840

1. Entity Name
MYAT TUN ENTERPRISES INC

66021268

Principal Place of Business	Mailing Address
601 BIIL FRANCE BLVD APT1402 DAYTONA BEACH, FL 32114	539 N MILLS AVE ORLANDO, FL 32803

07272007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
1116 GRANADA AVE	1116 GRANADA AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: HOLLY HILL, FL	City & State: HOLLY HILL
Zip: 32117 Country: USA	Zip: 32117 Country: USA

4. FEI Number: 20-0482983 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
TUN, THANT SIN 601 BIIL FRANCE BLVD APT 1402 DAYTONA BEACH, FL 32114	Name: TUN, THANT SIN Street Address (P.O. Box Number is Not Acceptable): 1116 GRANADA AVE City: HOLLY HILL FL Zip Code: 32117

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: X Thant Sin Tun 08/15/07
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
Due by September 14, 2007

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P TUN, THANT SIN 601 BIIL FRANCE BLVD, APT 1402 DAYTONA BEACH, FL 32114	☒ Delete	P TUN, THANT SIN 1116 GRANADA AVE HOLLY HILL, FL 32117	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 empowerment.

SIGNATURE: X Thant Sin Tun 08/15/07 386 405 0935
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #