

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P04000081212

1. Entity Name
YAU FAMILY INC.



FILED
06 APR 12 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
10720 SW 146TH AVE
MIAMI, FL 33186

Mailing Address
10720 SW 146TH AVE
MIAMI, FL 33186

2. Principal Place of Business
13911 SW 42 STREET

3. Mailing Address
13911 SW 42 STREET

Suite, Apt. #, etc.
111 & 112

Suite, Apt. #, etc.
111 & 112

03132006 Chg-P CR2E034 (11/05)

City & State
Miami, FL

City & State
Miami, FL

4. FEI Number
65-1248049

Applied For
Not Applicable

Zip
33175

Country
US

Zip
33175

Country
US

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

6. Name and Address of Current Registered Agent

YAU, RICARDO
10720 SW 146TH AVE
MIAMI, FL 33186

7. Name and Address of New Registered Agent

Name CORPORATE PROCESS SERVICES INC.
Street Address (P.O. Box Number is Not Acceptable)
2300 CORAL WAY
SUITE 200
City MAIMI FL Zip Code 33143

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 Steven Williams - Richard Williams 4-10-06
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, 2006 Fee will be \$550.00

9. Election Campaign Financing ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DP
NAME YAU, RICARDO ☐ Delete
STREET ADDRESS 10720 SW 146TH AVE
CITY-ST-ZIP MIAMI, FL 33186

TITLE DV
NAME YAU, HUMBERTO ☐ Delete
STREET ADDRESS 10720 SW 146TH AVE
CITY-ST-ZIP MIAMI, FL 33186

TITLE DS
NAME YAU, RAFAEL ☐ Delete
STREET ADDRESS 10720 SW 146TH AVE
CITY-ST-ZIP MIAMI, FL 33186

TITLE DT
NAME YAU, ALFONSO ☐ Delete
STREET ADDRESS 10720 SW 146TH AVE
CITY-ST-ZIP MIAMI, FL 33186

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 400070478284
CITY-ST-ZIP 04/14/06--01076--004 **158.75

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 02/4/12
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 empowered.

SIGNATURE: [Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/28/06 305-559-9992
Date Daytime Phone #