2008 FOR PROFIT CORPORATION ANNUAL REPORT

6. Name and Address of Current Registered Agent

DOCUMENT # P05000017271

1. Entity Name

LE, DUYEN T

148 WYNDHAM DRIVE WINTER HAVEN, FL 33884

1020 EAST COLONIAL DRIVE, INC.



FILED May 02, 2008 08:00 AN Secretary of State

Principal Place of Business

Mailing Address

1020 EAST COLONIAL DRIVE ORLANDO, FL 32803

148 WYNDHAM DRIVE WINTER HAVEN, FL 33884



04232008

No Chg-P

CR2E034 (11/05)

4. FEI Number 20-3355307

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title	il applicable (NOTE: Registere	d Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.			scing \$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS		
NAME STREET ADDRESS CITY-ST-ZIP	P LE, DUYEN T 148 WYNDHAM DRIVE WINTER HAVEN, FL 33884			U00000946929 05/30/08-80068-019 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	•			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ESS :		DO NOT WRITE IN THIS SPACE	
NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
NAME STREET ADDRESS CITY-ST-ZIP				
12. I hereby o	ertify that the information supplied with this fi on this report or supplemental report is true a	ling does not qualify for the exe	emptions contained in Chapter 119 ure shall have the same legal effective.	, Florida Statutes. I further certify that the information it as if made under path; 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:

ITED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #