PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P92000001586 (6)

920 S. 56TH AVE., CORP.

Principal Place o	of Business	Mailing Address			an anna kain mhint nann nuin láirt aidt imhl
920 SOUTH 56TH AVENUE HOLLYWOOD FL 33023		920 SOUTH 56TH A HOLLYWOOD FL 33			
				3. Date Incorporated or Qualified 10/29/1992	3a. Date of Last Report 02/01/1995
		2a. Mailing Address		4. FEI Number	Applied For
1		26		65-0367092	Not Applicable
# Suite, Apt. ادر	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		6. Election Campaign Financing	Fee Hequired
3		28		Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
.4	25	29	30		□No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New R	egistered Agent
			81 Name		
	N, HOANG		82 Street Add	iress (P.O. Box Number is Not Acceptab	le)
	UTH 56TH AVENUE				
HOLLYV	WOOD FL 33023		83		
			84 City		85 Zip Code
11 Director to	the previsions of Sections 507.05	00 and 607 1509 Florida Ctatus		oration submits this statement for the pur	
SIGNATURE	n, and accept the obligations of, Se (1) (1) (1) (1) (2) (2) (3) (4) (4) (4) (5) (6) (6) (6) (7) (6) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7		S. OTE: Rugistered Againt signature requir	ed wher reinstating) ADDITIONS/CHANGES TO OFF	DATE CERS AND DIRECTORS IN 12
11111	PD	☐ DELETE	1. 1 TITLE		Change Addition
NAME	DU VAN, HOANG		1.2 NAME		_
STREET ADDRESS	920 SOUTH 56TH AVENU	E	1.3 STREET ADDRESS		
CUY \$1 ZIF	HOLLYWOOD FL 33023		1.4 CITY-\$1-ZIP		
101,8	SD	☐ DELETE	2 1 TITLE		Change Addition
NAME	DUI THI, TRAN		2.2 NAME		
STREET ADDRESS	920 S.W. 56TH AVE.		2.3 STREET ADDRESS		
Cify-S1-7iP	HOLLYWOOD FL 33023	DELETE	2 4 CITY-ST-ZIP		
BILE NOAE		DELETE	3 1 TITLE		Change Addition
NAME STREET ADDRESS			3 2 NAME		
OTY-ST ZiP			3.3. STREET ADDRESS		
11/1.F		☐ DELETE	3 4 CITY-ST-ZIP		Change Addition
NAME			4.2 NAME		
STHEF! ADDRESS			4.3 STREET ADDRESS		
CIY SI ZIP			4.4 CiTY-S1-ZiP		
T-ILE		☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
C(TY+ST+Z)P			5 4 CITY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAM:			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY ST-ZIP	cortifu that the information a	of with this films in anti-stant for	6 4 CITY - ST - ZIP	for the control of th	07/0/4) 5/ / / 0
certify that to oath, that to appears in E	the information indicated on this an am an officer or director of the con Block 12 or Block 13 if chanded, o	a wan this ining is voluntarily furi nual report or supplemental and poration or the receiller or fluste here an attachment with an add	nual report is true and accurate enapowered to execute the ress.	for the exemption stated in Section 119. ate and that my signature shall have the iis report as required by Chapter 607, Flo	ur(ড)(ম), rionda Statutes. I further same legal effect as if made under xida Statutes; and that my name

SIGNATURE: V SIGNATURE AND TYPED OR PRINTED HAME DE