FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9200001586

920 S. 56TH AVE., CORP.

Principal Place of Business

Mailing Address

920 SOUTH 56TH AVENUE HOLLYWOOD FL 33023

920 SOUTH 56TH AVENUE HOLLYWOOD FL 33023

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90125 001 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

							10/29/1992			
2. Principal P	lace of Business	2a. Mailing	Address				4. FEI Number	· .		Applied For
21	وللأراب ويحييه والأراري ليستع الرياي	26					65-0367092			Not Applicable
Suite, Apt.	#, etc.		Apt. #, etc.		_		5. Certifcate of Status Desired		•	Additional Required
City & State	Α	City & S	State				6. Election Campaign Financing		\$5.0	O May Be
		28					Trust Fund Contribution			d to Fees
Zip	Country	Zip		Countr	v		8. This corporation owes the cu	rent vear Int	angible	
	25	29	13	0	•		Personal Property Tax.		Yes	□No
24	9. Name and Address of Curren			"			10. Name and Address of New	Registered	Agent	
	3. Native and Address of Carren	t regional re		81	Name	e				
DU VAN, HOANG										
920 SOUTH 56TH AVENUE					2 Stree	t Addres	ss (P.O. Box Number is Not Accep	table)		
HOLLYWOOD FL 33023					,					
1,02	E111000 1 E 000E0			[83	'					
	• •			84	City				85 Z	p Code
				-	' '			FL	<u> </u>	
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State im familiar with, and accept the obligations.	of Florida, Such	change was auti	nonzea o	y the cor	d corpor poration	ration submits this statement for the 's board of directors. I hereby acce	e purpose of ept the appoi	cnanging ntment as	registered registered
SIGNATURE	Signature, typed or printed name of registered ager	at and title if anniicable	(NOTE: R	egistered Age	ent signatur	e required v	when reinstating)	DATE		
12 : ::		ID DIRECTORS	(1.07)	13.	- Signator	0.1040	ADDITIONS/CHANGES TO O	FFICERS AN	ND DIREC	TORS IN 12
12.	PD	D DIRECTORS	☐ DELETE	1.1 TITLE			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Chang	
TITLE	DU VAN, HOANG			1.2 NAME		1				,
NAME						.				
STREET ADDRESS	920 SOUTH 56TH AVENUE				ET ADDRES	8				
CITY-ST-ZIP	HOLLYWOOD FL 33023			1.4 CITY-	ST-ZIP	-			Chang	e Addition
TITLE	SD		☐ DELETE	2.1 TITLE					□ cuant	ia Dynamicu
NAME	Dui thi, tran			2.2 NAME						
- STREET ADDRESS		- ~		2.3 STRE	ET ADDRES	s`				
CITY-ST-ZIP	HOLLYWOOD FL 33023			2. 4 CITY	ST-ZIP					
TITLE			DELETE	3.1 TITLE					Chang	ge 🗌 Addition
NAME				3.2 NAME		Ì				
STREET ADDRESS				3.3 STRE	ET ADDRES	is				
				3.4. CITY						
CITY-ST-ZIP TITLE	 		DELETE	4,1 TITLE		_			Chang	ge Addition
	Į i		_	4, 2 NAMI					•	
NAME					= ET ADORES					á
STREET ADDRESS	1					~				
CTTY-ST-ZIP			DELETE	4.4 CITY-		 -			Chang	e Addition
TITLE			DECETE	5.1 TITLE		-				g
NAME				5.2 NAME		_ [•	
STREET ADDRESS	:				ET ADDRES	×>				
CITY-ST-ZIP				5.4 CITY-						
TITLE			☐ DELETE	6.1 TITLE		1			Chang	ge 🗌 Addition
NAME	1			6.2 NAME						
STREET ADDRESS				6.3 STRE	ET ADDRES	s	•			
	· ·			6.4 CITY-	ST-ZIP				•	
CITY-ST-ZIP	certify that the information supplied w	th this filing door	e not qualify for t			ed in Se	action 119 07/3\(i) Florida Statutes	L further ce	rtify that th	e information

indicated on this annual report or supplemental annual report is true and that my signature shall have the same legal effect as if made under oath; that I am are officer or director of the conformation or the required or that my signature shall have the same legal effect as if made under oath; that I am are officer or director of the conformation or the required or the conformation or the required or the conformation or the required of the conformation or the required of the conformation or the required of the conformation or the required or the conformation of the conformation or the required or the conformation of the conformation or the required or the conformation of the co

SIGNATURE: