2007 FOR PROFIT CORPORATION - ANNUAL REPORT

DOCUMENT # P9200001586

1. Entity Name 920 S. 56TH AVE., CORP.



Principal Place of Business

920 SOUTH 56TH AVENUE HOLLYWOOD, FL 33023

Mailing Address

920 SOUTH 56TH AVENUE HOLLYWOOD, FL 33023

FILED Apr 25, 2007 08:00 AM Secretary of State



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

02182007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For S65-0367092 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

DU VAN, HOANG 920 SOUTH 56TH AVENUE HOLLYWOOD, FL 33023

DO NOT WRITE IN THIS SPACE

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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 Signature, typed or printed name of registered agent and title if approache (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees	•
10.	OFFICERS AND DIREC	CTORS			•
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DU VAN, HOANG 920 SOUTH 56TH AVENUE HOLLYWOOD, FL 33023				U2000702220
TITLE NAME STREET ADDRESS CITY+ST-ZIP	SD DUI THI, TRAN 920 S.W. 56TH AVE. HOLLYWOOD, FL 33023				U00000729322 05/08/07-80036-011 150.0
TITLE NAME STREET ADDRECS CITY+ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		·		IN 7	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CATY-ST-ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter [19, Florida Statutes. I further certify that the information					

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 chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if the chapter 607 is a statute of the chapter 607.

SIGNATURE:

SMATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

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