## 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 # P92000013045

Y2 ENTERPRISES, INC.

Principal Place of Business			
8000 W BROWARD BLVD SUITE #5009 PLANTATION FL 33388			
ue			

Mailing Address

## **FILED** Feb 19, 1999 8:00 am Secretary of State 02-19-1999 90086 024 \*\*\*150.00



SUITE #5009 PLANTATION FL 33388	JUPITER FL 33477		DO NOT WRITE IN THIS SPACE		
us .			3. Date Incorporated or Qualifed 12/18/1992		
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
11	26		65-0376860	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country  25	Zip Co	ountry	This corporation owes the current year     Personal Property Tax.	Intangible ☐ Yes ☐ No	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
YU, CHESTER		81 Name 82 Street Ad	dress (P.O. Box Number is Not Acceptable)		
208 CAPE POINT CIR		Street Address (P.O. Box Number is Not Acceptable)			
JUPITÉR FL 33477		83			
		04 00		and Zin Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE			the state of the s			
Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating)  DATE						
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D DELETE	1.1 TITLE	☐ Change ☐ Addition			
NAME	YU, CHESTER	1.2 NAME				
STREET ADDRESS	208 CAPE POINT CIR	1.3 STREET ADDRESS				
CITY-ST-ZIP	JUPITER FL 33477	1.4 CITY-ST-ZIP				
TITLE	D DELETE	2.1 TITLE	☐ Change ☐ Addition			
NAME	YASUI, TERRY	2.2 NAME				
STREET ADDRESS	73 WATERLOO DR SW	2.3 STREET ADDRESS	1			
CITY-ST-ZIP	CALGARY CD	2. 4 CITY-ST-ZIP	:			
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition			
NAME		3.2 NAME				
STREET ADDRESS		3.3 STREET ADDRESS				
CITY-ST-ZIP		3.4. CITY-ST-ZIP				
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition			
NAME		4.2 NAME	·			
STREET ADDRESS		4,3 STREET ADDRESS				
CITY-ST-ZIP		4.4 CiTY-ST-ZIP				
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition			
NAME		5.2 NAME				
STREET ADDRESS		5.3 STREET ADDRESS				
CITY-ST-ZIP		5.4 CITY-ST-ZIP				
TITLE	DELETE	6.1 TITLE	☐ Change ☐ Addition			
NAME		6.2 NAME				
STREET ADDRESS		6.3 STREET ADDRESS				
CITY-ST-ZIP	×	6.4 CITY-ST-ZIP				

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: