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

Mailing Address

12705 NW 42ND AVE.

MIAMI FL 33054-5117

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Feb 14 1997 8:00am

Secretary of State

3a. Date of Last Report

03/01/1996

3. Date Incorporated or Qualified

S. L. HUANG 3056889832

01/04/1993

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

Principal Place of Business

12705 NW 42ND AVE.

MIAMI FL 33054

DOCUMENT # P9300000235 (0)

NICEHOLD FLORIDA CORP.

City & State Country 2p 2p 30 Country Fruit Country Country Country 2p 2p 30 Country Country Country Country Country 2p 2p 30 Country Country	2. Principal P	lace of Bus-ness	2a, Mailing Address			4. FEI Number	Ar	pplied For		
Corty & School 27	21		26		65-0573184	_ No	t Applicable			
ZP Country Zp Country Zp Country Added to Pees Zp Country Zp Sp Country Zp Sp Country Sp	Suite, Apt. #, etc				5. Certificate of Status Desired	T T T T T T T T T T T T T T T T T T T				
28	,,,, ,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-,-		City & State	City & State		6. Election Campaign Financing	\$5.00	May Be		
Solution	23	28								
NAME and Address of Current Registered Agent MILER, SCOTT 12705 NW 42ND AVE. MIAMI FL 33054 B1 Name B2 Street Address (P.O. Box Number is Not Acceptable) B3 B4 City FL B5 Zip Code B4 City FL B5 Zip Code B4 City FL B5 Zip Code B5 Zip Code B5 Zip Code B6 City FL B6 Zip Code B7 Zip Code B8 Zip Code B	Zφ	Country	Zip	Country	/	8. This corporation has liability for intangible tax upders. 199.032,				
MILLER, SCOTT 1270S NW 42ND AVE. MIAMI FL 33054 83 84 City FL 85 Zip Code conceptable of provisions of Sections 607.0502 and 607.1508, Fordia Statutes, the above-named corporation submits this statement for the purpose of changing its registered onlice or registered agend, or both in the State of Florida Stantes, the above-named corporation submits this statement for the purpose of changing its registered onlice or registered agend, or both in the State of Florida Stantes, the above-named corporation submits this statement for the purpose of changing its registered onlice or registered agend with an an accept the changing its registered by the corporations board of directors. I hereby accept the appointment as registered some of the purpose of changing its registered some online of the purpose of changing its registered online of the purpose of changing its registered some online of the purpose of changing its registered some online of the purpose of changing its registered some online of the purpose of changing its registered some online of the purpose of changing its registered some online of the purpose of changing its registered some online of the purpose of changing its registered some online in the state of the purpose of changing its registered some online of the purpose of changing its registered some online of the purpose of changing its registered some	24 25 29 30			30						
MILEH, SUDIAL 1270 MW 42ND AVE. MIAMI FL 33054 4 City FL 85 Zip Code 11. Pursuant to the provisions of Soctions 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of the or regulatered agent, or both, in the State of Florida Such change was submitzed by the corporation board of directors. I hereby accept the suppointment as registered agent and trained with, and except the changing its registered of the corporation of the provisions of Soction 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS NO DIRECTORS IN 12 12. NAME 12. DIRECTORS IN 12 12. NAME 13. SIRRET ADDRESS 14. CITY ST. ZP 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. NAME 13. SIRRET ADDRESS 14. CITY ST. ZP 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. TITLE 17. NAME 17. STREET ADDRESS 18. STREET ADDRESS 19. STREET ADDRE										
MIAMI FL 33054 B3 B4	MILLER, SCOTT				Name					
MIAMI FL 33054 BB City FL BS Zip 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. I am 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 terminal with under adecept the obligations of, Sociolo 67 0505, Florida Statutes. SIGNATURE Signation, function of registered agent and the Augmental as the Augmental Agent agent and the Augmental Agent agent and the Augmental Agent a	12705 NW 42ND AVE.				Street Ad	Idress (P.O. Box Number is Not Acceptable)				
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 agent. I 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 transfer with and accept the cultipolation of Section 607 0505, Florida Statutes. SIGNATURE Signature spirit or investment of registered agent and tree if agent and accept the cultipolation of Section 607 0505, Florida Statutes. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. DIRECTORS IN 12 2MARE 12 YMME 13 SIRET ADDRESS CITY-ST-7P THE DELETE 21 TITLE 22 NAME 23 SIRET ADDRESS CITY-ST-7P THE DELETE 33 TITLE DELETE 34 TITLE DELETE 41 TITLE Change Addition Addition Addition Addition Addition Addition Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. ADDITIONS/CH										
11. Fursion 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 at manual are with and accept the obligations of Socion 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTEL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. I				83						
11. Fursion 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 at manual are with and accept the obligations of Socion 607 0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTEL ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. I				94	Cau		les 7in	Codo		
office or registered agent, or both, in the State of Fiorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agent. I zan trainals with, and accept the collegations of Sociolo 607 (505 K, Florida Statutes.) Signature					City	FL	PO Zip	200e		
agent Tens familiar with and accords the obligations of Section 607.0505, Florida Statutes. SIGNATURE Signation yet do ye need rame of page-level agent and the Ausproachie (NOTE Registered Agent agentative required when rewarding) D HUANG, S L 12 NAME 12 NAME 12 NAME 12 NAME 12 NAME 12 NAME 13 SIREET ADDRESS DPA LOCKA FL 33054 14 CITY-ST-ZP DELETE 15 TITLE 16 Change Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 IT INTE I	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									
SIGNATURE Signature type do yet need rannel of registered agent and the of approachie (NOTE Registered Agent alignature required when renetating) DATE	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. Land familiar with, and accept the obligations of Section 607,0505, Florida Statutes.									
Committee Comm	· · · · · · · · · · · · · · · · · · ·									
DELETE										
HUANG, S. L. 12 MAME 12 TOS NW 42ND AVE 13 STREET ADDRESS 12 TOS NW 42ND AVE 13 STREET ADDRESS 14 GITY-ST-ZP	12.			13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	S IN 12		
13 STREET ADDRESS 12705 NW 42ND AVE	TITLE	D	DELETE	1.1 TITLE			☐ Change	Addition		
CITY_ST_ZIP	NAME	HUANG, S L		1.2 NAME						
DELETE	STREET ADDRESS	12705 NW 42ND AVE		1.3 STREET	ADDRESS					
NAME	CITY-ST-ZIP	OPA LOCKA FL 33054		1.4 CITY - S	ST-ZIP					
23 STREET ADDRESS 2 3 STREET ADDRESS 2 4 CDTY-ST-ZIP	7:1LE		☐ DELETE	2.1 TITLE			Change	Addition		
	NAMÉ			2.2 NAME						
DELETE DELETE 3.1 TITLE DELETE Addition	STREET ADDRESS			2.3 STREET	ADDRESS					
STREET ADDRESS	CITY - ST - ZIF			2. 4 CITY-	ST-ZIP					
STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	TITLE		☐ DELETE	3.1 TITLE			Change	Addition		
34, CITY-ST-ZIP 34, CITY-ST-ZIP Change Addition Addi	NAME			3.2 NAME						
DELETE	STREET ADDRESS			3.3 STREET	ADDRESS					
NAME SIREET ADDRESS CITY- ST- ZIP DELETE DELETE 51 TITLE DELETE 51 TITLE Change Addition STREET ADDRESS CITY- ST- ZIP TITLE DELETE 52 NAME 52 NAME 53 STREET ADDRESS CITY- ST- ZIP TITLE DELETE 61 TITLE NAME 62 NAME 63 STREET ADDRESS CITY- ST- ZIP 14. I do 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	CITY-ST-7IP			3.4. CITY -	ST-ZIP					
A 3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS CITY-ST-ZIP TITLE DELETE 5.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.1 TITLE DELETE 6.2 NAME STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.3 STREET ADDRESS CITY-ST-ZIP TITLE DELETE 6.4 CITY-ST-ZIP 1.4 I do 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	TOTLE		☐ DELETE	4.1 TITLE			Change	Addition		
A 4 CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-ZIP THLE DELETE 5.1 TITLE STREET ADDRESS CITY-ST-ZIP THLE DELETE 6.1 TITLE Change Addition Addition Addition Figure 1 Addition	NAME			4. 2 NAME						
THE DELETE 5.1 TITLE Change Addition NAME STREET ADDRESS CITY-ST-7P THE DELETE 6.1 TITLE Change Addition Addition DELETE 6.1 TITLE Change Addition Addition Change Addition	STREET ADDRESS			4.3 STREET	ADDRESS					
NAME STREET ADDRESS CITY-ST-7P TITLE DELETE 61 TITLE Change Addition 62 NAME STREET ADDRESS CITY-ST-7P 64 CITY-ST-2IP 14. I do 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	CITY-ST-ZIP			4.4 City - 9	ST - ZiP	· ,				
STREET ADDRESS CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition 62 NAME STREET ADDRESS CITY-ST-ZIP 14. I do 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	TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition		
CITY-ST-ZIP ITILE NAME NAME STREET ADDRESS CITY-ST-ZIP 14. I do 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	NAME			5.2 NAME						
THE DELETE 61 TITLE Change Addition NAME STREET ADDRESS CITY-ST-7-P 14. I do 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	STREET ADDRESS			5.3 STREET	ADDRESS					
NAME STREET ADDRESS CITY-ST-7-P 64 CITY-ST-ZIP 14. I do 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	CITY-ST-7:P		·	5.4 CITY-5	ST-ZIP					
STREET ADDRESS CITY-ST-ZP 64 CITY-ST-ZIP 14. I do 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	TITLE		DELETE	6.1 TITLE			Change	Addition		
City-St-7.P 16. I do 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	NAME			6.2 NAME						
14. I do 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	STREET AFIDRESS			6.3 STREET	ADDRESS					
	CITY-ST-74P			6.4 CITY+5	ST-ZIP					