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

PROFIT CORPORATION ANNUAL REPORT 1999

YEUNG'S INVESTMENTS, INC.

1. Corporation Name

Principal Place of Business

2. Principal Place of Business

4184 AURORA ST. Suite, Apt. #, etc.

YEUNG, HOI SANG

-1957-71ST-STREET -MIAMI-BEACH FL 33141

MIAMI BEACH FL 33141

City & S ate

1957 71 ST.



DOCUMENT # P93000012243

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90166 006 ***150.00

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Mailing Address 1967-71-ST.--MIAMI-BEACH FL-33141 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/10/1993 4. FEI Number 2a. Mailing Address Appied For 26 4104 AURORA 65-0389641 Not Applicable \$8.75 Acditional 5. Certifcate of Status Desired Fee Required 27 City & State \$5.00 May Be 6. Election Campaign Financing CORAL Trust Fund Contribution Added to Fees 28 8. This corporation owes the current year Intangible Personal Property Tax. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Ad tress (P.O. Box Number is Not Acceptable) 82 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, the above-named corporation submit it his statement for the purpose of changing its 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. Zip Ccde

	Signature, typed or printed has le or registered agent tille use it oppresses	grater ou regerit angir-i	
12.	OFFICERS AND DIRECTORS	13.	ADDITIC NS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D DELETE	1.1 TITLE	LICA ALROPA ST Change Addition
NAME	YEUNG, HOI SANG	1.2 NAME	4104 AURORA ST, Change Addition LORAL GABLES, FL 33146
STREET ADDRES S	1957 71 ST.	1.3 STREET ADDRESS	LORAL GABLES, FL 23146
CITY-ST-ZIP	MIAMI-BEACH FL	1.4 CITY-ST-ZIP	
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRES S		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADORES S		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4. CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRES S		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	61 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	
44 11	- His that the information ourselied with this filing does not qualify for the	a everation stated	t in Section 119 07(3Vi). Florida Statutes, I further or diffy that the information

I nereby 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 AND TYPED OR PRINTED TAME OF SIGNING OFFICER OR DIRECTOR