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

PROFIT CORP*RATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🖰

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000013488						
Hou LEE WU, Inc.						
Principal Place	of Business	Mailing Addr	ess			
18463	Highway 41 NO.	· ·				
	4. 32549				·	
Luit,	11.00049					Date of Last Report
2. Principa Pla		2a. Mailing A	ddress		4. FEI Number	Applied For
21 Same		26	same aus	MOOVE	F1-3173186	Not Applicable
Suite, Apt #	esc	Suite, Apt	: #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & Sta	ite		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
71¢+	Jountry	Zip	~	Country	8. This corporation has liability for intangit	
24	25 9. Name and Address of Curr	29 ent Registered Age	30 30		Florida Statutes Yes 10. Name and Address of New Registers	L No
li FEN				81 Name	10/4	
UL FER	instational No)		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
18463 Highway 41 no.				63	- DIA	
	71. 33549			63	N/A	
ruir,	11, 20049			84 City	N/A F	85 Zip Code
					poration submits this statement for the purpose tion's board of directors. I hereby accept the a	
	familiar with, and accept the ob				,	
SIGNATURE 5.	ignaliate: typing or printed name or registured	agent and title it applicable	(NOTE Regis	lered Agent signature requ	ired when reinstating) DATE	
12.	OFFICERS A	ND DIRECTORS		3.	ADDITIONS/CHANGES TO OFFICERS A	
TOTAL STATE	KEETDENT	L,		.1 TITLE		Change Addition
NAME STREET ADD #555	i yan Hou 18463 Highway 4	no.		2 NAME 3 STREET ADDRESS		
CITY SI-ZIF	WITT 11 33549			4 CITY-ST-ZIP		
Talu:	lice President			1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition
N.W.	litentee.		2	.2 NAME		
STREET ATHURESS	18465 HWY 41 A	١. م	2	3 STREET ADDRESS		
DILLY ST. VIII.	Lutz, 744 3	354"]		4 CITY-ST-ZIP		Choose L Addison
IBUE		<u> </u>		11 TITLE ?		Change Addition
STREET ALTOHISS				13 STREET ADDRESS		
OUT S' 3P				4. CITY-ST-ZIP		
11.11				1 TITLE		Change Addition
NAVI			4	. 2 NAME		
STREET #768155			4	3 STREET ADDRESS		
DOY ST 76-				.4 CITY-ST-ZIP		11
1111				1 TITLE		Change
NAME				2 NAME	4,	15/14/90
SINGET ACTORS ST				3 STREET ADDRESS	///	14.11
100 to 100 100 100 100 100 100 100 100 100 10				4 CITY - ST - ZIP		Change Addition
NAM:		_		2 NAME	2000021907 -05/27/9701005	12
S RELECTIONS				3 STREET ADDRESS	-05/27/9701005	043
(at 4, 53, 79)				4 CITY-ST-ZIP	***165.00	
14. Into hereby información	certify that the information support of the feated on this annual report of	led with this filing do r supplemental annu-	es not qualify for al report is true ar	the exemption state nd accurate and tha	d in Section 119.07(3)(i). Florida Statutes. I furl at my signature shall have the same legal effect	ner certify that the as if made under oath; that

Fan. arroll serior director of the corporation of the receiver arrostee empowered to execute this report as required by Chapter 607, appears in Block 12 or Block 13 if chapter or on an attachment with an address.

SIGNATURE AND TIPED OR PRINCED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

May 14 1997 8:00am

Secretary of State