FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.04

FILED Mar 10 1998 8:00am **PROFIT** FLORIDA DEPARTMENT CORPORATION Sandra B. Mj ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS P93000013688 (5) **DOCUMENT #** HOU LEE WU. INC. Principal Place of Business Mailing Address 18463 HIGHWAY 41 NO. 18463 HIGHWAY 41 NO. **LUTZ FL 33549 LUTZ FL 33549** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/24/1993 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-3173186 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 Trust Fund Contribution Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent LEE, LI-FEN 18463 HIGHWAY 41 NO. 82 Street Address (P.O. Box Number is Not Acceptable) **LUTZ FL 33549** 83 84 City 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, 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 (NOTE Registered Agent signature required Signature, typed or printed name of registered agent and title if applicable when reinstating OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. TITLE DELETE 1 1 TITLE Change Addition HOU, LIYMR NAME 1.2 NAME 18483 HIGHWAY 41 NO. STREET ADDRESS 1.3 STREET ADDRESS **LUTZ FL 33549** 1.4 CITY - ST-ZIP CITY-ST-ZIP DELETE Change TITLE 2.1 TITLE Addition LEE, LI-FEN NAME 2.2 NAME 18463 HIGHWAY 41 NO. STREET ADDRESS 2.3 STREET ADDRESS **LUTZ FL 33549** CITY-SI-ZIP 2.4 CITY-ST-ZIP DELFTE Change ___ Addition TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELFTE Change □ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Channe TITLE 5 1 TITLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP ☐ Change DELETE Addition 6.1 TITLE TITLE

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14. 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, if on an attachment with an address Fen / SIGNATURE:

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY - ST-ZIP

NAME

STREET ADDRESS

CITY - ST - ZIP