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PROFIT CORPORATION ANNUAL REPORT 2000.



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000013977

00 APR 20 PM 4: 16 CECRETARY OF STATE PETWORTH CORPORATION Mailing Address Principal Place of Business **≘ GRAND BAHAMA CIRCLE** 6326-G GRAND BAHAMA CIRCLE FL 33615 DO NOT WRITE IN THIS SPACE **TAMPA FL 33615** 3. Date Incorporated or Qualifed 02/15/1993 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0401398 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 City & State City & State" \$5.00 May Be 6. Election Campaign Financing 'n Added to Fees Trust Fund Contribution 28 Zip Country 8. This corporation owes the current year Intangible Country Zip □No Yes Personal Property Tax. 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name WANG, MING C Street Address (P.O. Box Number is Not Acceptable) 6950 CYPRESS RD SUITE 208-15 83 PLANTATION FL 33317 Zip Code 84 Pursuant to the provisions of Sections 607.0502 and 607.0508. 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.

64 CITY-ST-ZIP Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the information indicated on this annual report or supplied entangular 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 13 if changed, or how adactions, with all other like empowered.

6 I TITLE 62 NAME -

63 STREET ADDRESS

DELETE

NAME

SIGNATURE	Signature, typed or printed name of registered agent and title if applicable (NOTE: Reg	gistered Agent signature to	equired when reinstating) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
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