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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

TITLE

NAME

TITLE

NAME

TITI F

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 11 1998 8:00am

Secretary of State

Change

Change

Change

2-1-50

Addition

Addition

Addition

☐ Addition

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000014227 (1)

FLORIDA ACUPUNCTURE ASSOCIATION, INC.

2905 LAKEVIEW DR. 2905 LAKEVIEW DR FERN PARK FL 32730 FERN PARK FL 20700- 32730 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/15/1993 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 **NOT APPLICABLE** Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes □ No g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LEE. YAO WU 875 MEADOWS RD ₿2 Street Address (P.O. Box Number is Not Acceptable) SSUTE 321 83 **BOCA RATON FL 33481** 84 City Zip Code 65 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** Signature, typed or printed name of registered agont and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition LEE, YAO WU NAME 1.2 NAME 8335 TWIN LAKES DR. STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL 33496** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME HUNG, WILLIAM S 2.2 NAME 2905 LAKEVIEW DR. STREET ADDRESS 2.3 STREET ADDRESS FERN PARK FL 32730 CITY-ST-ZIF 2. 4 CITY - ST - ZIP

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, or on an attachment with an address.

3.1 TITLE

3.2 NAME

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 DITY-ST-ZIP

3.4. CITY+ST+ZIP

DELETE

DELETE

DELETE

DELETE