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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000030472

## **FILED** Feb 13, 1999 8:00am **Secretary of State**

02-13-1999 90025 001 \*\*\*150.00

1	3 YUH, INC.						
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Principal Pla	ace of Business	Mailing Address				)	
5229 COCON	UT CREEK PKWY	5229 COCONUT CREEK PK	ΛWY				
MARGATE FL		MARGATE FL 33063	744.1				
					DO NOT WRITE IN	THIS SPACE	
					3. Date Incorporated or Qualifed		
					04/26/1993		
<del></del>	2. Principal Place of Business 2a. Mailing Address				4. FEI Number	A	pplied For
21 Suita Am	26				65-0406185		ot Applicable
22 Suite, Apr	Suite, Apt. #, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired		Additional
City & Sta	ato.	City & State	·				equired
23	316	28			-6Election Campaign Financing		May Be ===
Zip	Country	Zip	Country		Trust Fund Contribution		to Fees
24	25	<b>⊢</b> ¬ '	30	,	This corporation owes the current ye     Personal Property Tax.	ar Intangible ☐ Yes	MNo
	9. Name and Address of Curr		1301		10. Name and Address of New Regist		₩ NO
			81	Name	to. Hame and Address of New Negrati	ereu Agent	
	NG, LUNG-MING		100			<del></del>	
	9 COCONUT CREEK PKWY		82	Street Add	ress (P.O. Box Number is Not Acceptable)		
MAI	RGAE FL 33063		83			- 12 ST 12 ST 81 ST 12 ST 12	10 2 2 2 2 2
			<u> </u>				31442.35
			84	,			Code`
11. Pursuant	t to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	es, the above	e-named corp	poration submits this statement for the purpor	se of changing its	registered
	registered agent, or both, in the Stat am familiar with, and accept the oblig		ithorized by				
ayent. 1 a		ations of Section 607.0505. Flor	ida Statutes		ion's board of directors. I hereby accept the a	appointment as re	gistered
agent. 1		gations of, Section 607.0505, Flor	ida Statutes		ion's board of directors. I hereby accept the a	appointment as re	gistered
SIGNATURE	Signature, typed or printed name of registered ag	pent and title if applicable. (NOTE:	ida Statutes	ine corporati S.	on's board of directors. I hereby accept the a	appointment as re	gistered
SIGNATURE	Signature, typed or printed name of registered ag	pent and title if applicable. (NOTE: ND DIRECTORS	ida Statutes	ine corporati S.	ed when reinstating)	appointment as re	·
SIGNATURE  12.	Signature, typed or printed name of registered ag OFFICERS A	pent and title if applicable. (NOTE:	Registered Ager	ine corporati S.	ed when reinstating)  ADDITIONS/CHANGES TO OFFICER	appointment as re	·
SIGNATURE  12. TITLE NAME	Signature, typed or printed name of registered as OFFICERS A PD TANG, LUNG-MING	pent and title if applicable. (NOTE:  ND DIRECTORS	Registered Ager	ine corporati S.	ed when reinstating)	spoontment as re	PRS IN 12
SIGNATURE  12.	Signature, typed or printed name of registered ag OFFICERS A PD TANG, LUNG-MING 5229 COCONUT CREEK PKW	pent and title if applicable. (NOTE:  ND DIRECTORS	Registered Ager	nt signature require	ed when reinstating)  ADDITIONS/CHANGES TO OFFICER	spoontment as re	PRS IN 12
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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, or on an attachment with an address, with all other fike empowered.

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Lung-MWG TANG x 1/27/99