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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P93000062015**1. Corporation Name

MOON SHING CORPORATION

Principal Plac		Mailing Address	84						
FT LAUDERDALE FL 33315		FT LAUDERDALE FL 33	FT LAUDERDALE FL 33315			20.1	OT MONTE IN		
US		U\$				3. Date Incorporated or C	OT WRITE IN 1	I MIS SPACE	
						09/03/1993	adamed .		
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number		- Ac	oplied For
21		26				65-0436243		<u> </u>	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					-i	\$8.75	Additional
22		27				5. Certifcate of Status De	sired 📙	Fee Re	equired
City & Stat	te	City & State				6. Election Campaign Fin	- 11	•	May Be
23		28				Trust Fund Contribution	n		to Fees
Zip	Country	Žip	Coun	itry		8. This corporation owes	•	ar Intangible Yes	□No
24	25 9. Name and Address of Cu	rrent Registered Agent	30			Personal Property Tax 10. Name and Address o		<u>/`</u>	LINO
	5. Italie alia Address of Co	inent Registered Agent	1	81	Name	10. Name and Address 0	i itett itegiate	and Agent	
SHIN	NG, MOON T								
1705	STATE ROAD 84		[1	82	Street Addres	ss (P.O. Box Number is Not	Acceptable)		
FT Ł	auderdale fl		1	83					3 17 33
			ļ.	0.4	0"			()	<u> </u>
			[*	84	City	•		FL 85 Zip	Code
						ration submits this statement	for the nurne	e of changing its	
office or r agent. I a	to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the of	tate of Florida, Such change was	s authorized I	by th	named corpoi le corporation	n's board of directors. I hereb	y accept the a	ppointment as re	registered gistered
office or r	egistered agent, or both, in the S	Itate of Florida. Such change wa bligations of, Section 607.0505,	s authorized I Florida Statut	by th tes.	e corporation	n's board of directors. I hereb	by accept the a	ppointment as re	registered egistered
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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 like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Feb 10, 1999 8:00am

Secretary of State

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