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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra S. Morton
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **193000067007**
1. Corporation Name
YENNI CORPORATION

800001545486
-07/25/95--01063--019
****225.00 ****225.00

Principal Place of Business Mailing Address
8295 N.W. 27 AVENUE 8295 N W 27 AVENUE
MIAMI, FL 33147 MIAMI, FL 33147

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21		26		9/27/1993			
Suite, Apt. #, etc		Suite, Apt. #, etc		4. FEI Number		Applied For	
22		27		65 0438508		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution		☐ \$5.00 May Be Added to Fees	
Zip		Country		24		25	
29		30		8. This Corporation has liability for intangible tax under S. 199.032, Florida Statutes		☐ Yes ☒ No	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
FLORIDA ANNUAL REPORT SERVICE/ CANTERA & ASSOCIATES, INC. 1036 S.W. 1ST MIAMI, FL 33130				81 Name ROBERT PHEN			
				82 Street Address (P.O. Box Number is Not Acceptable) 8295 N.W. 27 AVENUE			
				83			
				84 City MIAMI FL 85 Zip Code 33147			

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 Robert Phen **ROBERT PHEN (VICE PRESIDENT)** 7/11/95
Signature (typed or printed name of registered agent and new agent) (b)(1) Registered Agent signature required when terminating

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE		1.1 TITLE	☐ Change ☐ Addition
NAME	P/D PETER Y. PHEN	1.2 NAME	
STREET ADDRESS	1081 N.E. 179 STREET	1.3 STREET ADDRESS	
CITY, ST, ZIP	N. MIAMI BEACH, FL	1.4 CITY, ST, ZIP	
TITLE	V/D	2.1 TITLE	☐ Change ☐ Addition
NAME	ROBERT V. PHEN	2.2 NAME	
STREET ADDRESS	3630 N 56 AVE. #319	2.3 STREET ADDRESS	
CITY, ST, ZIP	HOLLYWOOD, FL	2.4 CITY, ST, ZIP	
TITLE	S/D	3.1 TITLE	☐ Change ☐ Addition
NAME	LIU SUI YUN	3.2 NAME	
STREET ADDRESS	1050 N.E. 174 STREET	3.3 STREET ADDRESS	
CITY, ST, ZIP	N. MIAMI BEACH, FL	3.4 CITY, ST, ZIP	
TITLE	T/D	4.1 TITLE	☐ Change ☐ Addition
NAME	VIOLA ADEANNE PHEN	4.2 NAME	
STREET ADDRESS	1081 N.E. 179 STREET	4.3 STREET ADDRESS	
CITY, ST, ZIP	N. MIAMI BEACH, FL	4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), Florida Statutes. I further certify that the information contained 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.

SIGNATURE: Robert Phen **ROBERT PHEN** 7/11/95 (305) 535 2235
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR