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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P93000076498 (3) DOCUMENT # WAT AND THANG, INCORPORATED Principal Place of Business Mailing Address 10032 PINES BLVD. 10032 PINES BLVD. PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024 3. Date Incorporated or Qualified 3a. Date of Last Report 10/29/1993 04/18/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0443698 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees $Z_{\rm IP}$ Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes ☐ Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name THANG, THOMAS 82 Street Address (P.O. Box Number is Not Acceptable) 5654 S.W. 114TH AVE COOPER CITY FL 33330 63 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607. 508, 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typod or printed name of registered agent and tide if applicable DATE (NOTe: Rigistered Agont signature required when reinstating) OFFICERS AND DIRECTORS 12 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PSD TITLE DELETE 1.110:6 Add tion NAM: WAT, KAM W 1.2 NAME 7933 ALAHAMBRA BLVD. STREET ADDRESS 1.3 STREET ADDRESS MIRAMAR FL 33022 CITY-S1-ZIP 14 CITY - ST - Z-P TITLE VTD DELETE 2 1 1IILE Change Addition THANG, THOMAS NAME 2.2 NAME 5654 S.W. 114TH AVE. STREET ADDRESS 2.3 STREET ADDRESS **COOPER CITY FL 33330** 2 4 CITY - \$1 - ZIP THEF DELETE 3 1 TITLE Change Addition NAMI 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHY-ST-ZIP 34 CITY - \$1 - ZIP TITLE DELETE 4 1 THE ☐ Change ☐ Addition 4.2 NAME STREET ADORESS 4.3 STHEET ADDRESS 017Y - \$7 - 71P 4.4 Orly - \$1 - ZIP THEF □ DELETE 5 1 TITLE Change Addition NAMI 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5 4 CITY - \$1 - 2IP TITLE DELETE 6 1 7 ILE ☐ Change ■ Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CI1Y - S1 - ZIP 6 4 CHTY - ST - ZIP

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appears in Block 12 or Block 13 if changed, or on an attachiment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR ENHANCE OF SIGNING OFFICER OR DIRECTOR

SIGNATURE AND TYPED OR ENHANCE OF SIGNING OFFICER OR DIRECTOR

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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