**FILED** 

1/8/01 4073631688

## Jan 17, 2001 8:00 am Secretary of State 01-17-2001 90081 034 \*\*\*150 00 Principal Place of Business Mailing Address 7721 TURKEY LAKE ROAD 7721 TURKEY LAKE ROAD ORLANDO FL 32819 ORLANDO FL 32819 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 59-3209586 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHEN, JINN GUEY Street Address (P.O. Box Number is Not Acceptable) 7721 TURKEY LAKE ROAD ORLANDO FL 32819 City Zip Code FI 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida (NOTE. Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE Change ☐ Addition NAME CHEN. JINN GUEY NAME STREET ADDRESS STREET ADDRESS 7721 TURKEY LAKE ROAD CITY-ST-ZIP CITY-ST-7IP ORLANDO FL TITLE ☐ Delete TITLE ☐ Change ☐ Addition CHEN, JINN GUEY NAME NAME STREET ADDRESS STREET ADDRESS 7721 TURKEY LAKE ROAD CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32819 ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

DOCUMENT # P93000076510 ----

1. Entity Name

168 FOOD CORP.

SIGNATURE: