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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000078486 (6)

Principal Place of Business	Mailing Address	
7962 S.W. 89TH ST. MIAMI FL 33156	7962 S.W. 89TH ST. Miami FL 33156	
2. Principal Place of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·

**FILED** Apr 21 1998 8:00am Secretary of State

MASSON COMPUTER CONSULTING CO. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/15/1993 4. FEI Number Applied For 65-0459982 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees 23 Trust Fund Contribution 28 Ζŧp Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 LIANG, KAIYANG IANG KAIYANG 7962 S.W. 89TH ST. 62 **MIAMI FL 33156** 83 84 Miami 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 the state of Florida Statutes. SIGNATURE hered agent and title if applicable (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change TITLE LIANG, KAIYANG NAME 1.2 NAME 7962 S.W. 89TH ST. 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33156** 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 31 TITLE NAME 32 NAME STREET ADDRESS 3 3 STREET ADDRESS 3 4. CITY+ST-ZIP CITY-ST-ZIP DELETE Addition 41 TITLE TITLE 4 2 NAM8 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-S1-ZIP TITLE DELETE 5.1 TITLE ☐ Change Addition | NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY-ST-ZIP DELFTE Addition Change THILE 6.1 TITLE NAME 6.2 NAME STREET ADORESS **6.3 STREET ADDRESS** 

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 alternation with an address.

SIGNATURE: