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

PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name YJJ, INC.



DOCUMENT # P93000088222

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

May 06, 1999 8:00 am Secretary of State

05-06-1999 90102 002 ***150.00

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Principal Place of Business Mailing Address		Titolisal in idias hith doni conti opin opin opin				
4490 NORTHWEST 72ND AVE. MIAMI FL 33166	2491 NW 107 AVE. CORAL SPRINGS FL 33065			SPACE		
			3. Date Incorporated or Qualifed	3. Date Incorporated or Qualifed		
			12/20/1993			
Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For		
21	26		65-0456962	Not Applicable		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required		
City & State	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country 24 25	Zip Coi	untry	This corporation owes the current year In Personal Property Tax.	tangible □ Yes □ No		
g. Name and Address of Current Registered Agent		10. Name and Address of New Registered	10. Name and Address of New Registered Agent			
CHENG, RUEY HSIUNG 2491 NW 107 AVE. ND AVE.			Street Address (P.O. Box Number is Not Acceptable)			
		84	City	85 Zip Code		

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, and accept the obligations of Section 607.0505. Florida Statutes

agent. I a	m familiar with, and accept the obligations of, Section 607	.uous, Fionda	s Statutes.			
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Reg	gistered Agent signature re-	quired when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTOR	RS IN 12
TITLE	PD	DELETE	1.1 TITLE		Change	☐ Addition
NAME	CHENG, RUEY H		1.2 NAME			
STREET ADDRESS	2491 NW 107 AVE.		1.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33065		14 C/TY-ST-ZIP			_
TITLE		DELETE	2.1 TITLE		Change	Addition
NAME	CHENG, TSAI F		2.2 NAME			
STREET ADDRESS	2491 NW 107 AVE.		2.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL 33065		2, 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TITLE		Change	☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS		-	
CITY-ST-ZIP			5.4 CITY- ST- ZIP			
TITLE	Ω:	DELETE	6.1 TITLE		☐ Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
			64 CITY-ST-ZIP			

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.

SIGNATURE:

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