2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

P94000010816 **DOCUMENT #**

1. Entity Name

Principal Place of Business

MORNINGSIDE GROUP, INC.



FILED Jan 16, 2003 8:00 am Secretary of State 01-16-2003 90080 024 ***150.00

ORLANDO FL 3			ORLANDO FL 32819 US				,						
2. Principal Pla	ace of Busin	ness	3. Mailing Address										
Suite, Apt. #	#, etc.		Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES					
City & State)		City	& State	 -		4.	. FEI Number 59-323	1366	-		lied For Applicable	
Zip	Country		Zip	Zip		Country		5. Certificate of Status Desired \$8.75 Addition Fee Required				ional	
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent							
U. Manie and Accress of Current registrious Agent						Name:							
WO YEN LEE						Street Address (P.O. Boy Number in Not Accontable)							
						Street Address (P.O. Box Number is Not Acceptable)							
5100 CHERRY TREE LANE						,-				_ .			
ORLANDO FL 32819										. 1			
						City				FL ZIF	o Code		
3. 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. I am familiar with, and accept the obligations of registered agent.													
SIGNATURE =	Signature, typed	or printed name of registered agent	and title if app	dicable. (NOTE	: Registere	ed Agent signatur	e required where	n reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								9. Election Camp Trust Fund Cor	ntribution.		Added t		
10.	OFFICERS AND DIRECTORS				11.			ADDITIONS/CHANGES	TO OFFICER				
NAME	CPD LEE, WO Y 5100 CHERRY TREE LANE ORLANDO FL			☐ Delete		ITLE AME TREET ADDRESS ITY-ST-ZIP				Cr	iange	☐ Addition	
	STD LEE, ROSA CHEN S 5100 CHERRY TREE LANE ORLANDO FL			☐ Delete	Delete TITLE NAM STRE					□ CI		Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		NGELA L DFIELD ROAD WEST LE NY 10708	-	Delete		į.	D CHF 124 BR	PONDFIELD	LEE PROAG IV. Y.	10708		Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete		1	D 51	O LEE, DA OO CHERRY TO RLANDO, F	RON Z REE LA L . 3	NE 2819	nange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete					,	<u> </u>	hange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		ne information supplied with	h thịa filin-	Delete	- CIT	ME REET ADDRESS Y-ST-ZIP	ed in Section	on 119 07(3)(i) Florida S	tatutes. I furt	□ C		Addition Addition	

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1.14 03 407-876-4779

Date Daytime Phone #