## 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 # P9400055485 (4)

## FILED Apr 30 1998 8:00am Secretary of State

LIU ENTERPRISE USA, INC.										
5.5 5							1 1 <b>0 1 14 1</b> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ALIE BALAN ANAL	ene enema	AI AIII IAN
Principal Place of Business Mailing Address										
1523 U.S. HWY 98 S. 1523 U.S. HWY 98 S.										
LAKELAND FL 33801 LAKELAND FL 33801										
							DO NOT WRIT  3. Date Incorporated or Qualified		ACE	<del></del>
							07/25/1994			
2. Principal Place of Business 2a. Mailing Address						<del> </del>	4, FEI Number		Ac	plied For
21	<u> </u>		26	26			59-3255430		<u> </u>	t Applicable
				Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	
27									Fee Re	<u> </u>
23			28	<del></del>			8. Election Campaign Financing     Trust Fund Contribution     Added to Fees			
Zip	Country			Zip		у	8. This corporation owes or has paid		ne current year Intangible	
24	` Na	25 29 29 Name and Address of Current Registered			30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent			
	<del></del>	and Address of	Current Hegistere	ed Agent	81	Name	10. Name and Address of New R	egistered Ag	jent	
LIU, STÈE										
1523 U.S. HWY 98 S. LAKELAND FL 33801						Street Add	ress (P.O. Box Number is Not Accepta	ıble)		
EAREDAND FE 00001						3				
						City			85 Zip (	Code
								FL		
11, Pursuant office or r	to the provis egistered ac	sions of Sections 6 gent, or both, in th	607.0502 and 607.1 ie State of Florida	1508, Florida <b>Sta</b> tu Such change was	tes, the above authorized b	re-named corp by the corporal	poration submits this statement for the tion's board of directors. I hereby acce	purpose of c opt the appoi	hanging its intment as	s registered registered
agent. I a SIGNATURE	ım <b>tam</b> ılıar w	ith, and accept th	e obligations of, Se	ection 607.0505, Fi	lorida Statute	!S.				
	Signature, typed		blered agent and title if ap			jent signature requi	red when reinstating)	DATE		
12. TITLE	D	OFFICE	RS AND DIRECTO	DELETÉ	13. 1.1 TITLE	<del></del>	ADDITIONS/CHANGES TO OFFI		DIRECTOR Change	S IN 12 Addition
NAME	UU, STI	FVEN		1.2 NAME			<b>L</b>	orange	L Addition	
STREET ADDRESS						T ADDRESS				
CITY-ST-ZIP		OO FL 32837			1.4 CITY-	ST-ZIP				
TITLE	-			DELETE	2.1 TITLE		***************************************	L	Change	Addition
NAME					2.2 NAME					
STREET ADDRESS						T ADDRESS				
CITY-ST-ZIP TITLE				DELETE	2. 4 CITY - 3.1 TITLE	ST-ZIP		<del></del>	Change	Addition
NAME					3.2 NAME			<u> </u>	Onange	LI Addition
STREET ADDRESS						T ADDRESS				
CITY-ST-ZIP					3.4. CITY-					İ
TITLE				DELETE	4.1 TITLE			L	Change	Addition
NAME					4. 2 NAME					
STREET ADDRESS					4.3 STREE	T ADDRESS				
CITY-ST-ZIP				T DELETE	4.4 CITY	ST-ZIP			T &	1.400
TITLE NAME				DELETE	5.1 TITLE			L	Change	Addition
STREET ADDRESS					5.2 NAME					
CITY-ST-ZIP					5.4 City-	T ADDRESS				
TITLE				DELETE	6.1 TITLE	O) EII			Change	Addition
NAME					6.2 NAME			_	•	_ ``
STREET ADDRESS					1	T ADDRESS				
CITY-ST-ZIP			<del></del>		6.4 CITY-1	ST - ZIP				

14. I hereby certify that the information supplied with this filing does not dualify 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 the address.

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11-20-98