

FILE NOW: FILING FEE AFTER MAY 1 IS \$200.00

CORPORATION
ANNUAL REPORT
1995



TALLAHASSEE DEPARTMENT OF
SECRETARY OF STATE
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY 16 AM 8:21

DOCUMENT # P94000085644 (0)

YAU-LEE, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified 11/23/1994
3a. Date of last report

4. FFI Number 65-0535973
Applied For Not Applicable

5. Certificate of Status Lapsed ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for damages for under \$100,000 Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business 2a. Mailing Address

1449 SOUTH CONGRESS AVE
DELRAY BEACH FL 33444

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DELRAY BEACH FL 33444

21. State Agent or 26. Mailing Address

22. 1499 S. CONGRESS AVE 27. 1499 S. CONGRESS AVE

23. City & State 28. City & State

24. 25. 29. 30.

9. Name and Address of Current Registered Agent

WEINBERG, STEVEN
8000 PETERS RD.
2ND FLOOR
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Accepted)
83.
84. City FL 85. Zip Code

11. Declaration by the president of the corporation, secretary, and each of the Florida Statutes. The above named corporation submits this statement for the purpose of changing its registered office to the place designated in the State of Florida. It is hereby acknowledged by the corporation that it is not a corporation of another state and that it is not a corporation of another state.

SIGNATURE

12. OFFICERS AND DIRECTORS

NAME DPST
LEE, EDDIE
1449 SOUTH CONGRESS AVE.
DELRAY BEACH FL 33444

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

1499 S. CONGRESS AVE
DELRAY BEACH, FL 33444

14. I, the undersigned, certify that the information supplied on this form is voluntarily furnished and does not qualify for the exemption stated in Section 300.01, Florida Statutes. I further certify that the information indicated on this form is true and correct 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 and that in the event of fraud or misrepresentation to receive this report as required by Chapter 603, Florida Statutes, and that my name appears in Block 13 of this form, I shall be liable for the amount within address.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF CORPORATE OFFICER OR DIRECTOR

5-12-95