

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000001607 (7)

1. Corporation Name

EFFICIENCY, INC.



Principal Place of Business

Mailing Address

3347 N.W. 74TH AVE.
MIAMI FL 33025

3347 N.W. 74TH AVE.
MIAMI FL 33025

3. Date Incorporated or Qualified
01/05/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 3347 NW 74TH AVENUE

26 3347 NW 74TH AVENUE

4. FEI Number

Applied For

65-0544928

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

23 City & State

28 City & State

23 MIAMI, FL

28 MIAMI, FL

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

24 Zip

25 Country

29 Zip

30 Country

24 33122

29 33122

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NG, YUK CHUEN G
3347 N.W. 74TH AVE.
MIAMI FL 33025

81 Name

YUK CHUEN GENE NG

82

Street Address (P.O. Box Number is Not Acceptable)

3347 NW 74TH AVENUE

83

84

City
MIAMI

FL

85

Zip Code
33122

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 and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of Registered Agent and title if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PRESIDENT/YUK CHUEN GENE NG	<input type="checkbox"/> DELETE
NAME	3347 NW 74TH AVENUE	
STREET ADDRESS	MIAMI, FL 33122	
CITY-ST-ZIP		
TITLE	V.PRESIDENT/HON NAM IP	<input type="checkbox"/> DELETE
NAME	UNIT 8,21/F,ROKY INCL CENTER, 58-66 TAI LIN	
STREET ADDRESS	PAI RD, KWAI CHUNG, HONG KONG	
CITY-ST-ZIP		
TITLE	V.PRESIDENT/CHING PING CHEUNG	<input type="checkbox"/> DELETE
NAME	UNIT 8,2/F,FOOK HONG INCL BLDG.,19 SHEUNG	
STREET ADDRESS	YUET ST.,KOWLOON BAY, HONG KONG	
CITY-ST-ZIP		
TITLE	V.PRESIDENT/KI CHING YEUNG	<input type="checkbox"/> DELETE
NAME	ROOM 1101-04 STAR CENTER, 443-451 CASILE PEAK	
STREET ADDRESS	ROAD, KWAI CHUNG, HONG KONG	
CITY-ST-ZIP		
TITLE	V.PRESIDENT/SAU MAN LUI	<input type="checkbox"/> DELETE
NAME	FLAT A-11, 7/F, TONIC INCL CENTER, 26 KAI	
STREET ADDRESS	CHEUNG RD., KOWLOON BAY, HONG KONG	
CITY-ST-ZIP		
TITLE	V.PRESIDENT/KAI CHEUNG MAK	<input type="checkbox"/> DELETE
NAME	FLAT A-11, 7/F, TONIC INCL CENTER, 26 KAI	
STREET ADDRESS	CHEUNG RD., KOWLOON BAY, HONG KONG	
CITY-ST-ZIP		

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

YUK CHUEN GENE NG

(305) 599-9628

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Original Filing #

CR2E034 (3/96)