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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P95000033311**1. Corporation Name

CHRISTINA & COMPANY, INC.

** W. * * * * * * * * * * * * * * * * *					-	'I MA TELOP ELL D'ALL	f liddi ifdt jant		
Principal Place of Business Mailing Address									
8842 GREY HAV		8842 GREY HAWK POINT					·		
ORLANDO FL 32836		ORLANDO FL 32836			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed		1.2	
		4				04/24/1995			
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	Ar	oplied For	
21		26				65-0615071	No	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				\$8.75 Additional			
22		27				5. Certificate of Status Desired	Fee Re	equired	
City & State	е	City & State				6. Election Campaign Financing		May Be	
23		28				Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Inta		A.	
24	25	29	30			T Gradital Troporty Tux.	Yes	No	
	9. Name and Address of Currer	nt Registered Agent		24		10. Name and Address of New Registered A	gent		
370.1				81	Name	•			
	OUSIK		82 Street Addr			ess (P.O. Box Number is Not Acceptable)			
	GREY HAWK POINT					4.			
UHL	ANDO FL 32836			83					
				84	City	Maria Variation of the Section of th	85 Zip	Code	
				Щ		FL		intered	
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	( Lung &	ca.	u p			/9/	99_	2 · · · 31_	
SIGNATURE	Signature, typed or printed name of registered age			Agent	t signature required			200 01 40	
12.		DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition	
TITLE	P	☐ DELETE	1.1 TF				["] Cliange	L. Addition	
NAME	SANG, N. YU		1.2 NA						
STREET ADDRESS	8842 GREY HAWK POINT		1.3 ST	REET	ADDRESS		3	*	
CITY-ST-ZIP	ORLANDO FL 32836		_	TY-ST	-ZIP		☐ Change	Addition	
TITLE	VP	☐ DELETE	2.1 T				☐ Criange		
NAME	ousik, Yu		2.2 N/			•	٠.		
STREET ADDRESS	8842 GREY HAWK POINT				ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32836		2.4 C		T-ZIP		Change	☐ Addition	
TITLE		☐ DELETE	3.1 TI				☐ Change	C) Variable	
NAME .			3.2 N						
STREET ADDRESS	•				FADDRESS	1987年 -	11.7	550 35, 35	
CITY-ST-ZIP			3.4. C		T-ZIP	2	☐ Chance	Addition	
TITLE		☐ DELETE	4.1 TT			Francisco de Carresto		· — Mondon	
NAME	•		4.2 N						
STREET ADDRESS					ADDRESS	•			
CITY-ST-ZIP		□ ACIETE		TY-\$1	í-ZIP	•	Change	Addition	
TITLE		DELETE.	5.1 TI 5.2 N						
NAME			-		TADORESS				

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.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

DELETE

**FILED** 

Jan 28, 1999 8:00am

**Secretary of State** 

01-28-1999 90003 040 \*\*\*150.00

Change

☐ Addition