Applied For

Fee Required \$5.00 May Be

Not Applicable \$8.75 Additional

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

26 1110 Green Pine Blvd. #A-3.

W falm Beach . FL City & State

Mar 16, 1999 8:00 am **Secretary of State**

03-16-1999 90059 037 ***150.00

DOCUMENT # P95000045703

INTERNATIONAL QI GONG ASSOCIATION, INC.

Principal Place of Business 5420 N. OCEAN DRIVE SUITE 2401 RIVIERA BEACH FL 33404-2541

2. Principal Place of Business

W Pain Beach City & State

1110 Green Pine BIVO. #A-3

Mailing Address 5420 N. OCEAN DRIVE SHITE 2401

2a. Mailing Address

RIVIERA BEACH FL 33404-2541

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

06/13/1995

65-0589497

5. Certificate of Status Desired

6. Election Campaign Financing

4. FEI Number

23 3340	9	28 33409				Trus	t Fund Contr	ibution		Added to	Fees
Zip	Country	Zip		Country					rent year Inta		
24	25	29	30				onal Propert	<u> </u>			□No
	9. Name and Address of Current	Registered Agent	<u> </u>			10. Nam	e and Addr	ess of New	Registered A	<u>.ge</u> nt	
FIL :	14 <i>1</i> 51 7			81	Name	Fu. v	veizhi	ong .			
FU, WEI Z					Street Ad	dress (P.O. B			able)		
5420 N. OCEAN DRIVE SUITE 2401											
					83 1110 Green Pine Blvd. #A-3.						
RIVI	ERA BEACH FL 33404-2541			84	City La	<u> </u>	•			85 Zip C	ode
					u	J Palm	Beach)	FL	334	r09
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Flo	rida Statutes, t	he above	-named co	rporation subr	nits this stat	ement for the	purpose of c	hanging its r	egistered
office or r	registered agent, or both, in the State of manifer with, and accept the obligat	of Florida. Such cha ions of Section 607	nge was autno '.0505, Florida	Statutes.	me corpora	ition's board o	i directors. I	nereby acce	br ma abbom	illent as reg	istered
_		, .	•					i			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE: Regi	istered Agen	t signature requ	ired when reinstatir			DATE		
12.	OFFICERS ANI			13.		ADDIT	TIONS/CHAI	NGES TO OF	FICERS AND		
TITLE	D		DELETE	1.1 TITLE						Change	Addition
NAME	FU, WEI Z			12 NAME							
STREET ADDRESS	5420 N. OCEAN DRIVE, #2401		1	1.3 STREET	ADDRESS						}
CITY-ST-ZIP	RIVIERA BEACH FL 33404-2541			1.4 CITY-S1	-ZIP						
TITLE			DELETÉ	2.1 TITLE			•	•	•	☐ Change	☐ Addition
NAME				2.2 NAME			,				
STREET ADDRESS			1	2.3 STREET	ADDRESS						
CITY-ST-ZIP				2.4 CITY-S	T-ZIP						
TITLE			DELETE	3.1 TITLE						☐ Change	Addition
NAME				3.2 NAME							
STREET ADDRESS				3.3 STREET	ADDRESS						
CITY-ST-ZIP	\			3.4. CITY-S	T-ZIP						
TITLE			DELETE	4.1 TITLE						Change	☐ Addition
NAME				4. 2 NAME							
STREET ADDRESS				4.3 STREET	ADDRESS						
City-st-zip				4 4 CITY-ST	-ZIP						
TITLE			DELETE	5.1 TITLE	1					Change	Addition
NAME				5.2 NAME					•	*	
STREET ADDRESS				5.3 STREET	ADDRESS						
CITY-ST-ZIP				5.4 CITY-\$1	-ZIP						
TITLE			DELETE	6.1 TITLE						☐ Change	☐ Addition
NAME				6.2 NAME							
OTDEET 4000=00	.[6.3 STREET	ADDRESS						1

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.

6.4 CITY-ST-ZIP