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Mar 01, 1999 8:00 am  
Secretary of State

03-01-1999 90216 043 \*\*\*150.00

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000084872

1. Corporation Name  
GRAND CHINA, INC.

Principal Place of Business  
5200 N. UNIVERSITY DR.  
LAUDERHILL FL 33351

Mailing Address  
5200 N. UNIVERSITY DR.  
LAUDERHILL FL 33351

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/02/1995

4. FEI Number

65-0747386

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 1900 N. Federal Hwy  
Suite, Apt. #, etc.

22

23 Hollywood, FL 33020  
City & State Zip Country

24 33020

25 U.S.A

2a. Mailing Address

26 1900 N. Federal Hwy  
Suite, Apt. #, etc.

27

28 Hollywood, FL  
City & State Zip Country

29 33020

30 U.S.A

9. Name and Address of Current Registered Agent

LEE, YIH H  
5200 N. UNIVERSITY DR.  
LAUDERHILL FL 33351

81 Name

C. Y. LEE

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

1900 N. Federal Hwy

83

84 City

Hollywood

FL

85 Zip Code

33020

10. Name and Address of New Registered Agent

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

*Chiu Y. Lee*  
Signature, typed or printed name of registered agent and date if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSTD ☐ DELETE  
NAME LEE, CHIOU Y  
STREET ADDRESS 5200 N. UNIVERSITY DR.  
CITY-ST-ZIP LAUDERHILL FL 33351

TITLE VP ☐ DELETE  
NAME LEE, CHIOU Y  
STREET ADDRESS 5200 N. UNIVERSITY DR.  
CITY-ST-ZIP LAUDERHILL FL 33351

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 1900 N. Federal Hwy  
1.4 CITY-ST-ZIP Hollywood, FL 33020

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS 1900 N. Federal Hwy  
2.4 CITY-ST-ZIP Hollywood, FL 33020

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-2-99 954921 0188

CR2E034 (11/98)