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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

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Apr 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600003838 (5)

DCOFA CORPORATION

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| Principal Plac | | Mailing Address | | | ı takırda ilb saisk asirı aditi dalit saltı | . 8641 48184 HIBT 18181 (1 | HI 1811 3881 |
| 11903 NW 13TH ST. PEMBROKE PINES FL 33026 | | 11993 NW 13TH ST. PEMBROKE PINES FL | . 33026-3878 | | | | |
| | | | | | 3. Date Incorporated or Qualified 01/11/1996 | Sa. Date of Last | Report |
| 2. Principal Place of Business | | 2a. Mailing Address | | | 4. FEI Number | | Applied For |
| 21 | | 26 | | | 65-0635624 | ١ | lot Applicable |
| Suite, Apt. #, etc. | | Suite, Apt #, etc | Suite, Apt #, etc. | | 5. Certificate of Status Desired | 1 1 ' | Additional |
| 22 | | 27 | | | | Fee F | Required |
| City & Stati | te . | City & State | | | 6. Election Campaign Financing | |) May Be |
| 23 Žip | Country | 28 Zip | Cou | ntn (| Trust Fund Contribution | | to Fees |
| 4 | 25 | 29 | 30 | initi y | 8. This corporation has liability for in Florida Statutes | intangible tax under Yes 🔽 No | s. 199.032, |
| | 9, Name and Address of Cu | | [SU] | | 10. Name and Address of New Re | | |
| CHE | EN, SONG Q | | | B1 Name | | | |
| | 93 NW 13TH ST. | , | | | | | |
| | IBROKE PINES FL 33026 | | | 32 Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | | | B3 | | | |
| | | • | | | | | ······································ |
| | | | | B4 City | | FL 85 Zip | Code |
| 11. Pursuant office or r | to the provisions of Sections 607, registered agent, or both, in the S | .0502 and 607.1508, Florida S tate of Florida. Such change | Statutes, the all | oove-named o | orporation submits this statement for the poration's board of directors, I hereby accept | urnose of changing | its registered s registered |
| against La | an formular with, and gooded the of | | | | | | |
| | am familiar with, and accept the of | bligations of, Section 607,050 | o, Fioricia Stat | utes. | | | |
| | am familiar with, and accept the ol | | | | | DATE | |
| | Signalize, typed or printed name of registeres | | | | rquired when reinstaling! ADDITIONS/CHANGES TO OFFIC | | RS IN 12 |
| SIGNATURE | Signer religion for printed name of registers OFFICERS | d agent and tillo if applicable | (NOTE Registered | d Agent signature re | quired when reinstating] | | |
| SIGNATURE | Signer religion for printed natural of registers OFFICERS DP CHEN, SONG Q | d agent and tile if applicable AND DIRECTORS | (NOTE Registered | d Agent signature re | quired when reinstating] | ERS AND DIRECTO | |
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THE AND TYPEO OR PRINTED NAME OF BIONING OFFICER OR DIRECTOR