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2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

1. Entity Nam		0007410			FILED 03 APR 28 AH 10			
Principal Place of Business 15200 JOG RD DELRAY BEACH FL 33446		Mailing Address 15200 JOG RD C-1			SECRETARY OF STATE TALLAHASSEE FLORIDA			
		DELRAY BEACH FL 33446 US						
Principal Place of Business A Mailing Address					BB	914 8911 1 59 1		
Suite, Apt. #, etc. Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 65-0635251	⊢	olied For Applicable	
Zip	Country	Zip	Country		5. Certificate of Status Desired	\$8.75 Addi		
) 	6. Name and Address of Current	Registered Agent	<u> </u>		7. Name and Address of New Registered	Agent		
Name					Lee PAK			
CHEUNG, 15200 CA			- Street A	t Address (P.O. Box Number is Not Acceptable)				
15200 CARTER RD., ATLANTIC II PLAZA				6389 Coolidge CT				
	BEACH FL 33446	<i></i>	City	Boyn	ton Beach F	- 1 27	437	
8. The above	named entity submits this statement for	the purpose of changing its	s registered office of	r registered	agent, or both, in the State of Florida. I an	n familiar with.	ind accept	
the obligations of segistered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
C 62	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	State			Track and Servingation	Added	May Be to Fees	
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS	IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Cheung, Ting C 9811 APT B 61 Way S Boynton Beach FL 33437	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		4000184674 05/07/0301114001	□ Change - 6:4 **150.00	Addition	
title Name ·	VP LEE, PAK	☐ Delete	TITLE NAME]		☐ Change	☐ Addition	
STREET ADDRESS CITY-ST-ZIP	6389 COOLIDGE CT BOYNTON BEACH FL 33437		STREET ADDRESS CITY-ST-ZIP					
TITLE	D	☐ Delete	TITLE	D	ZHONG DE	Change	Addition	
NAME "STREET ADDRESS"	LI, ZHONG DE 24 LA CASA	managara ya	NAME STREET ADDRESS	24 V	lia DE CASA NORTE	-:		
CITY-ST-ZIP	BOYNTON BEACH FL 33437		CITY-ST-ZIP	BOYNT		6		
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NAME STREET ADDRESS			NAME STREET ADDRESS					
CITY-ST-ZIP	·		CITY-ST-ZIP					
indicated of the cor	on this report or supplemental report is	true and accurate and that it wered to execute this report	my signature shall h as required by Cha	ave the sar	ion 119.07(3)(i), Florida Statutes. I further come legal effect as if made under oath; that I lorida Statutes; and that my name appears	I am an officer o	or director	

SIGNATURE:

1/15/03 (561-637 1686)
Date Dayline Phone #