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

PROFIT CORPORATION ANNUAL REPORT

1998

Suite, Apt. #, etc.

City & State

Zip

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,他是这种可以把我们看到他的,我也是这种情况,这一种,这个人的人,也是我们的人,也是我们的人,一个人是我们的,也是我们的是是我们的,我们也是我们的人,也是这样的, 不是我们的人,我们也是我们就是我们



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P96000010645 (5)**

Country

SENGTHONG, KHAMSING 6719 BLANDING BLVD.

JACKSONVILLE FL 32244

9. Name and Address of Current Registered Agent

SINGS EUROPEAN IMPORTS INC.

Principal Place of Business Mailing Address

6719 BLANDING BLVD.

JACKSONVILLE FL 32244

2. Principal Place of Business
26. Mailing Address
26.

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Suite, Apt. #, etc.

City & State

Zip

FILED Apr 09 1998 8:00am Secretary of State



Yes Yes

Personal Property Tax due June 30.

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

10. Name and Address of New Registered Agent

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 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, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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Country

Name

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	Signature, typed or printed name of registered agent and title if applicable	e (NOTE	Registered Agent signature requi		DATE	
2.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTO	
TTLE .	D	☐ DELETE	1.1 TITLE		☐ Change	Additio
AME	SENGTHONG, KHAMSING		1.2 NAME			
TREET ADDRESS	6719 BLANDING BLVD.		1.3 STREET ADDRESS			
TY-ST-ZIP	Jacksonville FL 32244		1.4 CITY-ST-ZIP			
TLE		DELETE	2.1 TITLE		☐ Change	Additio
AME .			2.2 NAME			
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UME			4. 2 NAME			
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AME			5.2 NAME			
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AME			6.2 NAME		•	
TREET ADDRESS			6.3 STREET ADDRESS			
TY-ST-ZIP			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 supplied on the same legal effect as if made under oath; that I am an officer or director of the emporation 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 in chapter 607 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 in chapter 607.

SIGNATURE:

3-18-98