Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90114 014 ***150.00

A REPUBER TO SEAL PROPERTY AND ADDRESS OF THE PROPERTY OF THE PARTY OF

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

DOCUMENT # P96000016293

1. Corporation Name

IVY TRADING, INC.

									i
Principal Place of Business Mailing Address						1 1881 1881 1881 881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881 1881		18188 1111 1081	
1217 E LANDST	REET RD	8909 TURNBERRY COURT	9 TURNBERRY COURT			1			
ORLANDO FL 32824 ORLANDO FL 32819						DO NOT WRITE IN TH	e edace		
US					3. Date Incorporated or Qualified				1
		T. A				02/19/1996 4. FEI Number		-lind Fox	
2. Principal Pl	ace of Business	2a. Mailing Address						plied For	ł
21		26				59-3361125		t Applicable	ĺ
Suite, Apt. :	te, Apt. #, etc. Suite, Apt. #, etc.					5. Certifcate of Status Desired	\$8.75 A		
City & State	3 C. M. 2 C. Market	City & State				6. Election Campaign Financing	\$5.00	May Be	ļ
23	and the second second	28				Trust Fund Contribution	Added t	o Fees	
Zip	Country	Zip	Cou	intry		8. This corporation owes the current year	ntangible		1
24	25	29	30			Personal Property Tax.	Yes	□Nσ	Į
	9. Name and Address of Current		**	Γ		10. Name and Address of New Registere	d Agent]
			*-	81	Name				
TSAI, YINKI									-
8909 TURNBERRY COURT				82	Street Addr	ess (P.O. Box Number is Not Acceptable)			ļ
ORLANDO FL 32819				83					1
				84	City	F	_		j
l office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	f Florida. Such change was at	d by t	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	of changing its ointment as re	registered gistered		
SIGNATURE						d when reinstating) DATE			_
12.	OFFICERS AND		13.	, igoni	t aignitial a rodono	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	õ
TITLE	D DELETE		_	1.1 TITLE			☐ Change	Addition	(11/08)
NAME)	TSAI, YINKI			AME	ļ				
	•			1.3 STREET ADDRESS					2E034
STREET ADDRESS	5555 151115211111 555111								1 6
CITY-ST-ZIP			_	1.4 CITY-ST-ZIP			☐ Change	☐ Addition	2
TITLE	- ا		1	1					}
NAME	OTIEN, CEION			2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS	SS CODS FOR ADELIAN COOM								
CITY-ST-ZIP				2. 4 CITY-ST-ZIP			Change	Addition	1
TITLE		☐ DELETE	3.1 TI				□ change		1
NAME			3.2 N						}
STREET ADDRESS			3.3 S	TREET	ADDRESS	. 4. S			1
CITY-ST-ZIP	· 		_	:Т <u>Ү-\$</u>	T-ZIP				-
TITLE		☐ DELETE	4.1 TI	TLE			Change	Addition A	1
NAME			4. 2 N						.
-STREET ADDRESS	<u> </u>		4.38	REET	ADDRESS			•	-

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 trastee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attachment with an address, with all other like empowered.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

5.1 TITLE

52 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

1,34.1

TITLE

NAME

TILE

NAME

DELETE

DELETE

Change

Change

Addition

Addition