## 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 # P96000051569 1. Corporation Name BIG WONG, INC.

# FILED Mar 04, 1999 8:00 am **Secretary of State**

03-04-1999 90240 003 \*\*\*150.00



				-  .			
Principal Place of Business	Mailing Address	Mailing Address			, 4,16, 1,46		
14087 SW 48 LANE MIAMI FL 33175	14087 SW 48 LANE MIAMI FL 33175			DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed 06/17/1996			
2. Principal Place of Business	2a. Mailing Address			4, FEI Number	Ĺ	Applied For	
អា	26			65-0766472	<u>.                                      </u>	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certificate of Status Desired   \$8.75 Addition Fee Required			
City & State	City & State			6. Election Campaign Financing Trust Fund Contribution		.00 May Be ided to Fees	
Zip Country	Zip C 29 30	ountry		This corporation owes the current year In Personal Property Tax.	ntangible <u>K</u> Yes		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
KATZ, ŁAWRENCE S ESQ 3225 AVIATION AVENUE		81 82	81 Name 82 Street Address (P.O. Box Number is Not Acceptable)				
SUITE 300 BAYVIEW PLAZA COCONUT CROVE FL 33133		83					
		84	' '	F		Zip Code	
office or registered agent, or both, in the	507.0502 and 607.1508, Florida Statutes, the e State of Florida. Such change was authorize e obligations of, Section 607.0505, Florida St	ed by	the corporation	ration submits this statement for the purpose of source of directors. I hereby accept the app	of changing ointment	ng its registered as registered	

SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. □ DELETE [X] Change ☐ Addition 1.1 TITLE TITLE YU, GREGORY T 12 NAME NAME 14077 SW 48TH LANE 14087 SW 48 LANE 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP MIAMI, FL 33175 CITY-ST-ZIP Addition Change 2.1 TITLE TITLE □ DELETE YU, TIMOTHY 2.2 NAME NAME 14077 SW 48TH LANE 2.3 STREET ADDRESS 14087 SW 48 LANE STREET ADDRESS MIAMT, FL 33175. MIAMI FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE TITLE 3.1 TITLE NAME YU, MEI 3.2 NAME 14087 SW 48 LN 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition 6.1 TITLE □ DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 supplier with this limits does not dealing for the exemple 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 employered 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 organ attachment with an address, with all other like empowered.

Gregory