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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9600079878 (0)

## FILED May 09 1997 8:00am Secretary of State

		Mailing Address 1221 E ROBINSON ST ORLANDO FL 32801-211	5					
					3. Date Incorporated or Qualified 09/25/1996	<b>3a.</b> Da	te of Last	Report
···ງ	l Place of Business	2a. Mailing Address			4. FEI Number			Applied For
Suite, An	est # este	Suite, Apt. #, etc.			59-3402140	<u> </u>		lot Applicable Additional
Salto, Ap.	д <b>т, с</b> .с.	27			6. Certificate of Status Desired		<b>4</b> · · · · <b>-</b>	Required
City & St	tate	City & State		·	6. Election Campaign Financing		\$5.00	May Be
3]		28	<del></del>		Trust Fund Contribution			l lo Fees
- <b>Z</b> ір Э	Country	Zip	Соци	try	8. This corporation has liability for	intangible Ves [		s. 199.032,
<u></u>	25] 9. Name and Address of C	29 Current Registered Agent	30	<del></del>	Florida Statutes  10. Name and Address of New Re			
FONG, MARGARET				Name		<u> </u>	<u> </u>	
	21 E ROBINSON ST		ē	Street Ad	dress (P.O. Box Number is Not Accepta	ble)	<del></del>	
OP	RLANDO FL 32801			]			·····	
			8	33				
			E	34 City		FL	85 Zip	Code
	E.				rporation submits this statement for the ation's board of directors. I hereby acce		on thich to	s registered
JGNATURE 2.	E Signature, typied or printed name of registr OFFICEF			Agent s gnature req	urred when reinstating)  ADDITIONS/CHANGES TO OFFI	DATE		DRS IN 12
SIGNATURE  2.  DLE  AME  TREET ADDRESS	E Signature, typed or printed narrie of registr OFFICEF  D / P  LIU, CHENG M  8009 LANDGROVE CT	ereid agent and title if applicable. (A	13. 1.1 TITL 1.2 NAM 1.3 STAI	Agent & gnature req E ME EEY ADDRESS	uired when reinstating)	DATE	DIRECTO	PRS IN 12
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14. I do nereby 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-37

(904)239-oat

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