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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P97000008378 (6)

MYC CORP.

Principal Place of Business

Mailing Address

FILED
May 18 1998 8:00am
Secretary of State



11232 PINES BLVD. PEMBROKE PINES FL 33025		11232 PINES BLVD. PEMBROKE PINES FL 33025		DO NOT WRITE IN	I THIS SOUCE		
					3. Date Incorporated or Qualified 01/28/1997	THIS SPACE	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	A	pplied For	
21 15936 West state Road 84		26 15936 West State Rand 84		65-67-53152	N	ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired See Required Fee Required			
City & State		City & State		6. Election Campaign Financing	\$5.00	May Be	
23 Sunsing, FL		Sunrise . T-L		Trust Fund Contribution		to Fees	
Z ip	Country	Zip	Country		8. This corporation owes or has paid	the current year In	tangible
<u>24</u> <u> </u>	326 25 Browned		30 Broward.		Personal Property Tax due June 30		No
	9. Name and Address of Current i	Registered Agent		T	10. Name and Address of New Regis	stered Agent	
YIN YEING, DICK MAN 11232 PINES BLVD. 81 Name 92 Street Address (B.O. Rev. Number in Not Assessable)							
		82	Street Addres	ss (P.O. Box Number is Not Acceptable)		
PE	MBROKE PINES FL 33025						
			83				
			84	City		85 Zip	Code
11. Pursuant to the provisions of Spections 607 0502 and 607 1508 Floride Statutes the above providing submits the statement for the provisions of Spections 607 0502 and 607 1508 Floride Statutes the above providing submits the statement for the provisions of Spections 607 0502 and 607 1508 Floride Statutes the above providing submits the statement for the provisions of Spections 607 0502 and 607 1508 Floride Statutes the above providing submits the statement for the provisions of Spections 607 0502 and 607 1508 Floride Statutes the above providing submits the statement for the provisions of Spections 607 0502 and 607 1508 Floride Statutes the above providing submits the statement for the provisions of Spections 607 0502 and 607 1508 Floride Statutes the above providing submits the statement for the provisions of Spections 607 0502 and 607 1508 Floride Statutes the above providing submits the statement for the statem							
11. 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 office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND [DIRECTORS	13.	-	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTOR	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			Change	Addition
NAME	YIN YEING, DICK MAN		1.2 NAME				
STREET ADDRESS	11232 PINES BLVD.		1.3 STREET	ADDRESS			
CITY-ST-ZIP	PEMBROKE PINES FL 33025		1.4 CITY-ST-ZIP				
TITLE	SD DELETE		2.1 TITLE		-	☐ Change	Addition
NAME	YEUNG, MAN CHEONG		2.2 NAME	ļ			ľ
STREET ADDRESS	11232 PINES BLVD.		2 3 STREET ADDRESS				
CITY-ST-ZIP	PEMBROKE PINES FL 33025		2: 4 CITY-ST-ZIP				
TITLE	VPO CHEUNG DELETE		3.1 TITLE			☐ Change	☐ Addition
NAME	YEUNG, SIU PING		3.2 NAME				
STREET ADDRESS	11232 PINES BLVD.		3.3 STREET	ADDRESS			l
CITY-ST-ZIP	PEMBROKE PINES FL 33025		3.4. CITY-ST-ZIP				
TITLE	VPD	DELETE 4.17				L Change	☐ Addition
NAME	11000 DIMES DIVID		4. 2 NAME				İ
STREET ADDRESS	PEMBROKE PINES FL 33025		4.3 STREET	1			
CITY-ST-ZIP	FEMIDITURE FINES FL 33023	☐ DĒLĒTĒ	4.4 CITY - S	T- ZIP			
TITLE		LJ OELE IE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREFT	1			
CITY-ST-ZIP TITLE		DELETE	54 CITY-S	1-ZIP		Obence	T Addition
NAME		ניין הנרנונ	6.1 TIPLE			☐ Change	☐ Addition
			6.2 NAME	1000000			
STREET ADDRESS			6.3 STREET				
14. I hereby o	certify that the information supplied with	this filing does not qualify for	6.4 CiTY-Si	ion stated in Se	ection 119 07/3(ii) Florida Statutes Live	ther certify that the	information
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 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.							