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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000028430 1. Corporation Name

LIU KANG'S, INC.

Katherine Harris

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90064 040 ***150.00



Principal Place of Business Mailing Address									
6177 JOG ROAD 6177 JOG ROAD									
LANTANA FL 33467 LANTANA FL 33467						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed			
						03/28/1997			
O Malling Address						4. FEI Number	Δnn	lied For	
Principal Place of Business 2a. Mailing Address						**		Applicable	
21	4	26				65-0739312	\$8.75 A		
Suite, Apt.	#, etc.	— — ·	Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required			
22		27	Ptoto			FI C - O		<u>'</u>	
City & State	•	— ´	City & State			6: Election Campaign Financing \$5.00 May Be Added to Fees			
23		28						11 663	
Zip	Country	Zip		Country		8. This corporation owes the current year Intangible Personal Property Tay Yes - 1 No			
24	25		29 30			resonar reperty rex.			
	9. Name and Address of Curr	ent Registered Ag	ent			10. Name and Address of New Register	ed Agent	_	
				81	Name			l	
-	PEI FANG			82 Street Address (P.O. Box Number is Not Acceptable)					
	JOG ROAD								
					83				
					84 City 85 Zip Code				
			•	84	City	F	EL 85 Zip C	oue	
11 Pureuant	to the provisions of Sections 607.0	502 and 607 1508	Florida Statutes, the	e above	e-named co	ornoration submits this statement for the purpose	of changing its	egistered	
office or s	agistored agent or both in the Sta	te of Florida, Such i	change was authori	zea nv	the corpor	ation's board of directors. I hereby accept the ap	pointment as reg	istered	
agent. I a	m familiar with, and accept the obli	gations of, Section	607.0505, Florida S	tatutes					
SIGNATURE			01075 Oi-1) -i-natura sam	juired when reinstating) DATE			
	Signature, typed or printed name of registered a	AND DIRECTORS		13.	it signature req	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12	
12.		AND DIRECTORS		1 TITLE			☐ Change	Addition	
	PD		_				_ ,	_	
NAME	U0, 1 L1 1/1/0		.2 NAME						
STREET ADDRESS	0111 00 d 1101 D			.3 STREET	ADDRESS				
CITY-ST-ZIP			4 CITY-S	T-ZIP			□ Addition		
TITLE			☐ DELETE 2	2.1 TITLE		•	Change	Addition	
NAME			2	2.2 NAME					
STREET ADDRESS			2	2.3 STREET ADDRESS					
CITY-ST-ZIP			2	. 4 CITY-S	IT-ZIP				
TITLE				.1 TITLE		7	Change `	Addition	
NAME			3	.2 NAME					
					r ADDRESS				
STREET ADDRESS			J	WOINCE	ADDACGO				

☐ DELETE 6.1 TITLE Change ☐ Addition TITLE 6.2 NAME NAME 63 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 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, with all other like empowered.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME



PRESIDENT

Change

☐ Change

☐ Addition

Addition