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**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000048792

1. Corporation Name

ORIENTAL VALLEY EXPRESS, INC.

Principal Place of Business Mailing Address							I SM OLIDO I TIO INDIA INDIA NOVI SOVIE	B Blef a Bret Eastr a		8116 F191 4881
3855 SW 137 A	VE	3855 SW	137 AVE							
SUITE 3		SUITE 3					DO NOT W	NITE IN THIS	CDACE	
MIAMI FL 33175 MIAMI FL 33175						a Data	DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualifed			
						06/0	03/1997			
2. Principal Pl	ace of Business	2a. Mailir	ng Address			4. FEI I			<del></del>	olied For
21		26				65-0	<u>)758880</u>			Applicable
Suite, Apt.	#, etc.	Suite	, Apt. #, etc.			5. Certi	fcate of Status Desired		<b>\$8.75</b> A Fee Red	
22		27								·
City & State	9	— ·	& State				tion Campaign Financin	g 🗆	\$5.00 t Added to	
23	0	28		Country			t Fund Contribution			7 - 662
Zip	Country	Zip	[_	_		i	corporation owes the cu	irrent yezi int		□No
24	9. Name and Address of Curre	29		30		1	ne and Address of Nev	Registered		
_	g. Name and Address of Curre	ent Registered	- Ageint	81	Name	10. 114.				
WON	ig, yiu shing									
15125 SW 172ND STREET				82 Street Addres		ddress (P.O. B	ox Number is Not Acce	ptable)		
	AI FL 33187			83	<del> </del>	<del></del>	<del></del>			
					1		<u></u>			l l
				84	City			FL	85 Zip C	Code
11. Pursuant	to the provisions of Sections 607.05	602 and 607.150	08, Florida Statutes	s, the above	e-named c	orporation sub	mits this statement for the	ne purpose of	changing its	registered
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Sui	ch change was aut	horized by	the corpor	ration's board c	of directors. I hereby acc	ept the appoi	ntment as reg	jistered
	m raminar with, and accept the cong	janons on, occur	011 001.0000, 1 10110		••					
										ł
SIGNATURE	Signature, typed or printed name of registered ag					quired when reinstation	ng)	DATE		
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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 hystee 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. attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP