PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT

 Corporation 	ENTERPRISES, INC	J0U03 I			
Principal Place	of Business	Mailing Address		4 IOO IIOO IIO AMIII IMAII MAIII MAIII ADIII ADIII	<u>in altil galso mirko silat ilai soni</u>
14430 TABEBUIA MIAMI FL 33014 US	A LANE,	14430 TABEBUIA LANE MIAMI LAKES FL 33014 US		DO NOT WRITE IN TH	IS SPACE
	:			3. Date Incorporated or Qualifed 07/11/1997	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0781559	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
- City & State	θု န္းက . ၁ (၁) (၁) (၁) (၁)	City & State -	<u>.</u> •	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	ntangible
24	25	29 3	io	Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registere	d Agent
ROYALE MANAGEMENT SERVICES INC 2319 N ANDREWS AVE FT LAUDERDALE FL 33311			82 Street Addr /44 3 0 83 City	ni Labes. F	
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 amiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signification, typed or punited hame of registered agent and title if Applicable. (NOTE: Registered Agent signeture required when reinstating) OATE OADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	☐ Change ☐ Addition
NAME STREET ADDRESS	SHEN, JASON 14430 TABEBUIA LANE		1.2 NAME 1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI LAKES FL 33014	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME STREET ADDRESS	SHUI, K Y 14430 TABEBUIA LANE		2.2 NAME 2.3 STREET ADDRESS	áng, Shui K.	
CITY-ST-ZIP	MIAMI LAKES FL 33014	El ocuere	2.4 CITY-ST-ZIP		☐ Change - ☐ Addition
TITLE	· •	DELETE	3.1 TITLE		
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS	•	_
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS	,		4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
TITLE NAME		_ occit	5.2 NAME		
STREET ANDRESS			5.3 STREET ADDRESS		}

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 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 17 changed, or on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

C. Shen 4/7/99 (301)558-5817

☐ Change

☐ Addition

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90072 031 ***150.00