

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000065230

Entity Name: MUI, INC.

FILED
Jan 30, 2005
Secretary of State

Current Principal Place of Business:

9975 MIRAMAR PKWY
MIRAMAR, FL 33025

New Principal Place of Business:

Current Mailing Address:

9975 MIRAMAR PKWY
MIRAMAR, FL 33025

New Mailing Address:

FEI Number: 65-0776985

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUI, JOHN
6436 PERRY STREET
HOLLYWOOD, FL 33024 US

Name and Address of New Registered Agent:

MUI, JOHN
2051 NW 99TERR
PEMBROKE PINES, FL 33024 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JOHN MUI

01/30/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MUI, JOHN
Address: 6436 PERRY STREET
City-St-Zip: HOLLYWOOD, FL 33024

Title: VP () Delete
Name: YUNG MUI, KAM
Address: 2051 NW 83RD TERR
City-St-Zip: PEMBROKE PINES, FL 33024

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: MUI, JOHN
Address: 2051 NW 99 TERR
City-St-Zip: PEMBOKE PINES, FL 33024

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOHN MUI

PRES

01/30/2005

Electronic Signature of Signing Officer or Director

Date