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

Mailing Address

3350 NAVY BLVD PENSACOLA FL 32505

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000072016

Principal Place of Business

3350 NAVY BLVD

US

PENSACOLA FL 32505

E. WILLIAMS INVESTMENT, INC.

08/18/1997 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 59-3462151 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State \$5.00 May Be City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 23 28 Country Zip Zip Country 8. This corporation owes the current year Intangible Personal Property Tax. □No 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name DEES, DAVID L. Street Address (P.O. Box Number is Not Acceptable) 3300 N PACE BLVD, STE 315 PENSACOLA FL 32505 83 84 City 85 Zip Code 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. **ISIGNATURE** (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ☐ DELETE Change ☐ Addition 1.1 TITLE TITLE CHIANG, CHU-YIN 12 NAME NAME 9812 PINEBRAKE CT 1.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL 32514 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change DELETE 2.1 TITLE TITLE WILLIAMS, ESTHER H-O 2.2 NAME NAME 9812 PINEBRAKE CT 2.3 STREET ADDRESS STREET ADDRESS PENSACOLA FL 32514 2. 4 CITY-ST-ZIP CITY-\$T-ZIP Change ☐ Addition □ DELETE 3.1 TITLE TITLE 3.2 NAME NAMÉ ara Hilla STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition □ DELETE 4.1 TITLE TITLE 4. 2 NAME NAME . 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE ☐ Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP 6.1 TITLE Change Addition □ DELETE TITLE 62 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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 13 if changed, or on an attachment with an address, with all other like empowered.

DIUGHU-Yin Chiange 10 President

FILED

Jan 21, 1999 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

01-21-1999 90006 007 ***150.00

CR2E034 (11/98)