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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P97000082816**

PAGODA, INC.

FILED Feb 18, 1999 8:00am **Secretary of State**

02-18-1999 90096 040 ***150.00

Principal Place	e of B	usiness	Mailing Address	5			'			1901 (910)	
1311 97 STREET 1311 97 STREET								•			
BAY HARBOR ISLANDS FL 33154 BAY HARBOR ISLANDS FL 331								DO NOT WRITE	IN THIS SPA	CE	
							3 Date I	ncorporated or Qualifed	114 TI 110 OI A		
								4/1997			
2. Principal Pl	lace o	f Business	2a. Mailing Add	ress	-		4. FEI N	•		Ani	olied For
21			26	1000				789047		\leftarrow	Applicable
Suite, Apt.	#. etc		Suite, Apt. #	t. etc.			050	103041	¢		dditional
22	.,	27					5. Certifo	ate of Status Desired	ן Ψ'	Fee Red	I .
City & State	е	- City & State -					6 - Flöctic	n Campaign Financing	و میشندند. ماران میشندند	5:00	•
23	28						7	Fund Contribution)	Added to	-
Zip					Country						71000
24		25 29 30					8. This corporation owes the current year Intangible Personal Property Tax.				
1	9.	Name and Address of Current						and Address of New Reg			
					81	Name					
LAI,						0					
		STREET			82	Street A	daress (P.O. Bo	Number is Not Acceptable	•) .		
BAY	HAR	BOR ISLANDS FL 33154			83			***			
					84	City			FL 85	Zip C	ode
11 Pursuant t	to the	provisions of Sections 607.0502	and 607 1508 Flor	ida Statutes th	he abovo	named c	romoration cubm	to this statement for the nur		ging its I	rogictorod
office or re	egiste	ed agent, or both, in the State of	Florida. Such chan	nge was author	rized by t	the corpor	ration's board of	directors. I hereby accept th	ne appointme	it as reg	istered
agent. I ar	n fam	liar with, and accept the obligation	ins of, Section 607.	0505, Florida S	Statutes.						
SIGNATURE	S1	e, typed or printed name of registered agent a		WOTE 6							
12.	Signatu	OFFICERS AND			13.	signature rec	quired when reinstating)	ONS/CHANGES TO OFFIC	DATE ERS AND DII	PECTO	2S IN 12
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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.

SIGNATURE:

E OF SIGNING OFFICER OR DIRECTOR