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PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

SEP 22 PM 2:04

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # *P98000041107*

1. Corporation Name

*DSY, INC.*

Principal Place of Business

Mailing Address

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

*5/6/98*

2. Principal Place of Business

21 *3111 UNIVERSITY DR*

2a. Mailing Address

26 *3111 UNIVERSITY DR*

Suite, Apt. #, etc

22 *#115*

Suite, Apt. #, etc

27 *#115*

City & State

23 *CORAL SPRINGS, FL*

City & State

28 *CORAL SPRINGS, FL*

Zip

24 *33065*

Country

25 *BROWARD*

Zip

29 *33065*

Country

30 *BROWARD*

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

*SHEN, CHI-CHANG*

82 Street Address (P.O. Box Number is Not Acceptable)

*1840 NW 124 WAY*

83

84 City

*CORAL SPRINGS*

FL

85 Zip Code

*33071*

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.

SIGNATURE *Chi-Chang Shen*

Signature, typed or printed name of registered agent and date if applicable

(NOTE Registered Agent signature required when reinstating)

*3/19/99*

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE *D* ☒ DELETE

NAME *SHEN, DENNY J.*

STREET ADDRESS *3111 UNIVERSITY DR.*

CITY-ST-ZIP *CORAL SPRINGS, FL 33065*

TITLE *D* ☐ DELETE

NAME *SHEN, YUNG-FANG*

STREET ADDRESS *3111 UNIVERSITY DR.*

CITY-ST-ZIP *CORAL SPRINGS, FL 33065*

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

☐ Change ☐ Addition

*000002824156-4*

*-03/30/99 -01088-010*

*\*\*\*150.00* ☐ Change ☐ Addition

☐ Change ☒ Addition

*DP SHEN, CHI-CHANG  
1840 NW 124 WAY  
CORAL SPRINGS, FL 33071*

☐ Change ☒ Addition

*DS SHEN, JEN GUANG  
1840 NW 124 WAY  
CORAL SPRINGS, FL 33071*

☐ Change ☐ Addition

☐ Change ☐ Addition

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.

SIGNATURE: *Chi-Chang Shen* *CHI-CHANG SHEN* *3/19/99*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*(954) 752-3463*

CR2E034 (11/98)