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 # P98000050614

GREAT WALL, INC. OF HERNANDO

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90021 022 ***150.00



											1911 BIBI 1981
Principal Place of Business Mailing Address							114411441114				
5447 SPRING HILL DRIVE	5447 SPF	5447 SPRING HILL DRIVE									
SPRING HILL FL 34606		spring i	SPRING HILL FL 34606				DO NOT WRITE IN THIS SPACE				
							2 Data Incom-			SPACE	
							3. Date Incorporat 06/04/1998	ed or Qualife	u		
2. Principal Place of Bu	siness	2a. Maili	ng Address				4. FEI Number			Apr	lied For
21		26					59-35	1625	- 3	Not	Applicable
Suite, Apt. #, etc.			, Apt. #, etc.				5. Certifcate of Sta			\$8.75 A	dditional
22	27	27				5. Certificate of Sta	ilus Desireu		Fee Red	quired	
City & State	City	City & State				6. Election Campa	ign Financing	, _	\$5.00 1	May Be	
23	28	28				Trust Fund Con	tribution		Added to	Fees	
Zip	Zip	Zip Country				8. This corporation owes the current year Intangible					
24	25 29 30			30			Personal Property Tax. Yes No				
9. Nar	ne and Address of C	urrent Registered	Agent				10. Name and Add	iress of New	Registered /	Agent	
CHO MILLIA				8	1	Name				٠	}
CHO, WILLIAM 5447 SPRING HILL DRIVE			82			Street Address (P.O. Box Number is Not Acceptable)					
SPRING HILL	. PL 34000			8	3						
				8	4	City	<u></u>		FL	85 Zip C	ode
		7.0500 1.007.45	OO Flasida Statuta	450 050		named same	aration cultimits this etc	tomont for th	e purpose of	changing its	registered
11. Pursuant to the pro office or registered agent. I am familiar	agent, or both, in the with, and accept the	State of Florida. Su obligations of, Secti	ch change was at on 607.0505, Flor	uthorized brida Statute	y thes	ne corporatio	n's board of directors.	I hereby acc	ept the appoi	ntment as reg	istered
SIGNATURE 4	allet	ena						1-	S-PP		1
Signature, ty	ped or printed name of register	red egent and title if applica	ble. (NOTE:	Registered Ag	jent s	signature required	when reinstating)		27112		
12.		RS AND DIRECTOR		13.			ADDITIONS/CH/	ANGES TO O	FFICERS AN		
TITLE 1 ² ,	S. T. >	_	DELETE	1.1 TITLE	•					Change Change	Addition
NAME W	ILLIAM CH	0 	?	1.2 NAM	E						}
STREET ADDRESS 5	447 SPRIN	CARC D.		1.3 STRE	ETA	ADDRESS					
CITY-ST-ZIP	RINGHICC,	FC 346	06	1.4 CITY	ST-Z	ZIP		n-u	· · · · · ·		
TITLE	,		□ DELETE	2.1 TITLE	•					Change	☐ Addition
NAME				2.2 NAMI	E						
STREET ADDRESS				2.3 STRE	ET A	ADDRESS			••		<u> </u>
CITY-ST-ZIP				2. 4 CITY	'- ST-	- ZIP			- · ·	, ~	·
TITLE			☐ DELETE	3.1 TITLE	Ξ					Change	☐ Addition
NAME				3.2 NAMI	E						
STREET ADDRESS				3.3 STRE	ET A	ADDRESS					
CITY-ST-ZIP				3.4. CITY	ST-	-ZIP					
TITLE			DELETE	4.1 TITLE	=					☐ Change	☐ Addition
NAME				4. 2 NAM	ΙE					•	
STREET ADDRESS				4.3 STRE	ETA	ADDRESS					
CITY-ST-ZIP				4.4 CITY	-ST-Z	ZIP					
TITLE			☐ DELETE	5.1 TITLE						☐ Change	Addition
NAME	•			5.2 NAM	E						
STREET ADDRESS				5.3 STRE	ETA	ADDRESS					
CITY-ST-ZIP				5.4 CITY	-ST-2	ZIP					
TITLE			☐ DELETE	6.1 TITLE			•			☐ Change	Addition
NAME				6.2 NAM	E						
STREET ADDRESS				6.3 STRE	ETA	ADDRESS			•		
CITY OF 7ID				64 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.

SIGNATURE: