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 # P98000083562

1. Corporation Name

Principal Place of Business	Mailing Address		
12626 RINGWOOD AVE	12626 RINGWOOD AVE		
ORLANDO FL 32837	ORLANDO FL 32837		

Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90039 021 ***150.00

RYAN &	JOHN INVESTMENT, INCO	RPORATED				I CROCKER HE CHINE COM MONEY PORT COM CONTROL OF THE CHINE CHIEF CONTROL OF THE C
Principal Place	of Business	Mailing Address				- ((PEITZE ()10 (010) (ATT) ABEST ABITY PAIGE 19192 STATE BALLA BALLA BALLA
12626 RINGWOOD AVE 12626 RINGWOOD AVE						
ORLANDO FL 32837 ORLANDO FL 32837					į	DO NOT WRITE IN THIS SPACE
	•					
		-				3. Date Incorporated or Qualifed 09/28/1998
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For	
21 26						59-3530934 Not Applicable
Suite, Apt.	Apt. #, etc Suite, Apt. #, etc. 27					5. Certifcate of Status Desired
City & State City & State					6. Election Campaign Financing \$5.00 May Be	
23	28					Trust Fund Contribution Added to Fees
Zip	Country	Zip				8. This corporation owes the current year Intangible
24	25	29	30	-		Personal Property Tax.
24 ;	9. Name and Address of Curren		(00)			10. Name and Address of New Registered Agent
				81	Name	
TAN.	KUAI					
	6 RINGWOOD AVE		ļ	82	Street Addres	ess (P.O. Box Number is Not Acceptable)
	ANDO FL 32837		-	83		
, ₁₀ 1				0.5		· .
				84	City	FL 85 Zip Code
	W. 11.2.15	- 4 250				The late of the property of the property of the project of the pro
office or reagent. I as	, _					oration submits this statement for the purpose of changing its registered n's board of directors. I hereby accept the appointment as registered
	Signature, typed or printed name of registered ager		- -	Agent	signature required v	when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TiT			_ Oldings
NAME	TAN, KUAI		1.2 NA			•
STREET ADDRESS	12626 RINGWOOD AVE		1.3 ST	1.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32837		1.4 C/1	ry-ST-	ZIP	
TITLE	V	☐ DELETE	2.1 TIT	Œ	}	☐ Change ☐ Addition
NAME	ZḤENG, QIAN J		2.2 NA	ME		
STREET ADDRESS	12626 RINGWOOD AVE		2.3 ST	REET	ADORESS	
CITY-ST-ZIP	ORLANDO FL 32837		2.4 CI	TY-ST	-ZiP	<u> </u>
TITLE		☐ DELETE	3.1 TIT	LE		☐ Change ☐ Addition
NAME			3.2 NA	3.2 NAME		
STREET ADDRESS		•	3.3 ST	3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CI	TY-ST	-ZIP	
TITLE		☐ DELETE	4.1 TII	ſLΕ		☐ Change ☐ Addition
NAME		•	4.2 N	AME		
STREET ADDRESS			4.3 ST	REET /	ADDRESS	•
CITY-ST-ZIP			4.4 CI	TY-ST-	ZIP	
TITLE	J. S.	☐ DELETE	5.1 TIT	ILE		☐ Change ☐ Addition
NAME		-	5.2 NA	ME	[
STREET ADDRESS	**		. 5.3 ST	REET	ADDRESS	
CITY-ST-ZIP			5.4 CI	TY-ST-	ZIP	
TITLE		☐ DELETE	6.1 TIT	īLE	1	. Change Addition
NAME			6.2 NA	ME	}	,
STREET ADDRESS			6.3 ST	REET	ADDRESS	
CITY-ST-ZIP			6.4 CF	1Y-ST-	-ZIP	
OD 1-3 (* 44)						

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.

407-438-0388

Daytime Phone #