


FILED

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Secretary of State

06-09-2000 90018 006 ***150.00

APR-29-00 01:01 PM R. SIU, CPA / J. D. FOSTER, CPA
FILE NOW: FILING FEE AFTER MAY 1

INCORPORATION ANNUAL REPORT 2000

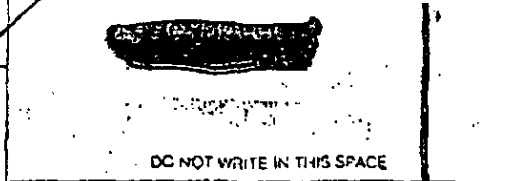


STATE OF FLORIDA
DIVISION OF CORPORATIONS

DOCUMENT # P98000101209

Mailing Address: 599 S Atlantic Ave, Ormond Beach, FL 32176-7755

Principal Place of Business: 599 S Atlantic Ave, Ormond Beach, FL 32176-7755



3. Date incorporated or Duplicated: 1-1-1999

3a. Date of Last Report: [Blank]

4. FBI Number: 59-3545952

5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Section (Foreign Financing): Fund Contribution \$5.00 May Be Added to Fees

7. Nonprofit Exempt from \$108.75 Supplemental Fee

8. This corporation has liability for intangible tax under S 99.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent: William Ho, 599 S Atlantic Ave, Ormond Beach, FL 32176

10. Name and Address of New Registered Agent: William Ho, 599 S Atlantic Ave, Ormond Beach, FL 32176

11. Pursuant to the provisions of Sections 607.0502 and 607.0503 or Sections 617.0502 and 617.1504, Florida Statutes, the incorporator/corporation submits this statement for the purpose of changing its registered office or principal office, or both, in the State of Florida. Such change was authorized by the corporation's board of directors and hereby accepted by the incorporator/corporation and subject to the regulations of Section 607.0505 or 617.0505, Florida Statutes.

SIGNATURE: [Signature] DATE: [Blank]

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 2000	
1. NAME	Ho, Sarah	11. TITLE	
2. STREET ADDRESS	599 S Atlantic Ave	12. NAME	
3. CITY-STATE-ZIP	Ormond Beach, FL 32176	13. STREET ADDRESS	
4. TITLE		14. CITY-STATE-ZIP	
5. NAME	Ho, William	15. TITLE	
6. STREET ADDRESS	599 S Atlantic Ave	16. NAME	
7. CITY-STATE-ZIP	Ormond Beach, FL 32176	17. STREET ADDRESS	
8. TITLE		18. CITY-STATE-ZIP	
9. NAME		19. TITLE	
10. STREET ADDRESS		20. NAME	
11. CITY-STATE-ZIP		21. STREET ADDRESS	
12. TITLE		22. CITY-STATE-ZIP	
13. NAME		23. TITLE	
14. STREET ADDRESS		24. NAME	
15. CITY-STATE-ZIP		25. STREET ADDRESS	
16. TITLE		26. CITY-STATE-ZIP	
17. NAME		27. TITLE	
18. STREET ADDRESS		28. NAME	
19. CITY-STATE-ZIP		29. STREET ADDRESS	
20. TITLE		30. CITY-STATE-ZIP	

SIGNATURE: [Signature] 4-26-00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR