

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2006 8:00 am
Secretary of State

05-09-2006 90082 015 ***150.00

DOCUMENT # S25675

1. Entity Name
GREAT EAST, INC.



Principal Place of Business
303 RALEIGH ST.
ORLANDO, FL 32806

Mailing Address
303 RALEIGH ST.
ORLANDO, FL 32806

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

05042006

Chg-P

CR2E034 (11/05)

4. FEI Number
59-3053283

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KUI HUA, CHIU
255 S. ORANGE AVE.
SUITE 1600
ORLANDO, FL 32802

Name
CHIU, KUI-HUA

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

303 RALEIGH ST.

City
ORLANDO

FL

Zip Code
32806

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME S ☐ Delete
STREET ADDRESS CHIU, KUI-HUA
CITY-STATE-ZIP 600 BLAIRSHIRE CIRCLE
WINTER PARK, FL 32792

TITLE
NAME ☒ Change ☐ Addition
STREET ADDRESS 303 RALEIGH ST.
CITY-STATE-ZIP ORLANDO, FL 32806

TITLE
NAME D ☐ Delete
STREET ADDRESS CHIU, CHING-WEI
CITY-STATE-ZIP 600 BLAIRSHIRE CIRCLE
ORLANDO, FL 32792

TITLE
NAME ☒ Change ☐ Addition
STREET ADDRESS 303 RALEIGH ST.
CITY-STATE-ZIP ORLANDO, FL 32806

TITLE
NAME D ☐ Delete
STREET ADDRESS HUA-WEN, HAN
CITY-STATE-ZIP 1515 TEMPLE DR.
WINTER PARK, FL 32789

TITLE
NAME ☒ Change ☐ Addition
STREET ADDRESS 303 RALEIGH ST.
CITY-STATE-ZIP ORLANDO, FL 32806

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-STATE-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #