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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # **S63345** 1. Corporation Name

CHINA YUNG, INC.

Mailing Address

Mar 03, 1999 8:00 am **Secretary of State**

03-03-1999 90007 001 ***150.00



Principal Place of Business 720 E LAS OLAS 720 E LAS OLAS FT LAUDERDALE FL 33301 FT LAUDERDALE FL 33301 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 07/01/1991 Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 65-0270065 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing \Box Trust Fund Contribution Added to Fees 28 23 Zip Zip Country 8. This corporation owes the current year Intangible Country □No X Yes 24 30 Personal Property Tax. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name BLUTSTEIN, GEORGE J. Street Address (P.O. Box Number is Not Acceptable) 20801 BISCAYNE BLVD SUITE 303 83 **AVENTURA FL 33180** Zip Code 84 City 85 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

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required w ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. DELETE Change 1.1 TITLE TITLE SHUM, MARCO 1.2 NAME NAME 207 LAWN ACRES CIR 1.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE ☐ Change 2.1 TITLE TITLE DUONG, VINH 2.2 NAME NAME 3351 NE 20 AVE 2.3 STREET ADDRESS STREET ADDRESS FT LAUDERDALE FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 3.1 TITLE TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34. CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 4.1 TITLE TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 51 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling 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.

6.4 CITY-ST-ZIP

61TITLE

62 NAME 6.3 STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

TITLE

☐ DELETE

☐ Addition

☐ Change

CR2E034 (11/98)