**FILE NOW: FILING FEE AFTER MAY 1 IS $225.00**

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
SANDRA B. MORTHAM
Secretary of State
Division of Corporations

APPROVED AND FILED

95 MAY 10 AM 10:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S65472 (0)

1. Corporate Name
SONIAS PATTIES INCORPORATED

Principal Place of Business
10852 SW 104 ST
MIAMI FL 33176

Mailing Address
10852 SW 104 ST
MIAMI FL 33176

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/05/1991
3a. Date of Last Report: 04/20/1994

2. Principal Place of Business — 21 Street Address — 22 City & State — 23 Zip — 24 County
2a. Mailing Address — 26 Street Address — 27 City & State — 28 Zip — 29 County — 30

4. FEI Number: 65-0574139 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under § 199.032 Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent
YEE KEOW, KENNETH
10852 SW 104 ST
MIAMI FL 33176

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — FL — 85 Zip Code

11. Pursuant to the provisions of Section 607.0505 and 607.0506, 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 duties of Section 607.0505, Florida Statutes.

SIGNATURE: (Typed or Printed Name of Registered Agent) Date

12. OFFICERS AND DIRECTORS

| | |
|---|---|
| Title | D |
| Name | YEE KEOW, KENNETH |
| Street Address | 16625 SW 99 CT |
| City, St, Zip | MIAMI FL |
| Title | D |
| Name | YEE KEOW, SONIA MARIE |
| Street Address | 16625 SW 99 CT |
| City, St, Zip | MIAMI FL |
| Title | |
| Name | |
| Street Address | |
| City, St, Zip | |
| Title | |
| Name | |
| Street Address | |
| City, St, Zip | |
| Title | |
| Name | |
| Street Address | |
| City, St, Zip | |
| Title | |
| Name | |
| Street Address | |
| City, St, Zip | |

13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

| | |
|---|---|
| Title | ☐ Change ☐ Addition |
| 1. Name | |
| Street Address | |
| City, St, Zip | |
| Title | ☐ Change ☐ Addition |
| 2. Name | |
| Street Address | |
| City, St, Zip | |
| Title | ☐ Change ☐ Addition |
| 3. Name | |
| Street Address | |
| City, St, Zip | |
| Title | ☐ Change ☐ Addition |
| 4. Name | |
| Street Address | |
| City, St, Zip | |
| Title | ☐ Change ☐ Addition |
| 5. Name | |
| Street Address | |
| City, St, Zip | |
| Title | ☐ Change ☐ Addition |
| 6. Name | |
| Street Address | |
| City, St, Zip | |

14. I hereby certify that the information supplied with this report is voluntarily furnished and 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 is correct 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 with an title or as an attachment with an address.

SIGNATURE: KENNETH YEE KEOW Pres. 5. 3. 1995 (305) 598-6695
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0194001 CP