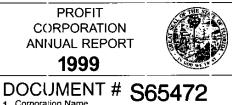
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

1, Corporation Name



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 28, 1999 8:00 am Secretary of State Katherine Harris

04-28-1999 90066 035 ***150.00

SONIAS	PATTIES INCORPORATED									
Principal Plac	e of Business	Mailing Address					i i Basi Bilb ira dirat dirisi gratt i	8818 ISBI B1811	81811 81811 81811	BIBLE BIBLE IBBL
10852 SW 104	ST	10852 SW 104 ST	10852 SW 104 ST							
MIAMI FL 33176 MIAMI FL 33176							DO NOT WE	ITE IN TUI	C CDACE	
						-	3. Date Incorporated or Qualifer		SOFACE	
						İ	07/05/1991			
2. Principa P	Place of Business	2a. Mailing Address					4. FEI Number		Α	priled For
21		26	٦							ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certifc ate of Status Desired		7 - · · ·	Additional
22		27					5. Certificate of Status Desired		Fee F	lec uired
City & Stat	te	City & State					6. Election Campaign Financing		•	May Be
23		28	0				Trust Fund Contribution			tc Fees
Zip	Courtry Zip		Cour	itry			8. This corporation owes the cu	rrent year ir		L∄tNo
24	25	29	30				Persor al Property Tax. Name and Address of New	Popietore	Yes	IZINO
	9. Name and Address of Curren	t Kegisterea Ayent		81	Name		10. Name and Address of New	Registeret	Agent	
YEE	KEOW, KENNETH									
	52 SW 104 ST		[82 Street		Ac dress	(P.O. Box Number is Not Accep	table)		
	MI FL 33176		1	83						
				•						
				84	City			FI	85 Zip	Code
SIGNATUFE	Signature, typed or printed na ne of registered ager	n and title if applicable (NOT	E. Registered			equired who		DATE		
12.		DIRECTORS	13.	_			ADDITIONS/CHANGES TO C	FFICERS 1	ND DIRECT ☐ Change	
TITLE	D WEEKENWEEK	☐ DELETE	1.1 TIT						□ Change	[] Addition
NAME	YEE KEOW, KENNETH		1.2 NAME							
STREET ADDRESS	1			1.3 STREET A						ļ
CITY-ST-ZIP	MIAMI FL 33157	☐ DELETE		1.4 CITY-ST-ZIP 2.1 TITLE					☐ Change	Addition
TITLE	YEE KEOW, SONIA MARIE	LJ DECETE	2.1) III							
NAME STREET ADDRESS	ACEAC CIAL CATIL SUP			2.3 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL 33157		2.4 CITY-ST-ZIP							
TITLE	MID WILL CO VO	☐ DELETE	3.1 TIT		, 2				☐ Change	☐ Addition
NAME			3.2 NA	ME						
STREET ADDRESS			3.3 STF	3.3 STREET ADDRESS						
CITY-ST-ZIP	ST-ZIP		3.4. C(1	3.4. CITY-ST-ZIP						
TITLE		☐ DELETE 4.1		.1 TITLE					Change	☐ Addition
NAME			4. 2 NA	ME	1					
STREET ADDRESS			4.3 STF	REET	ADDRESS					
CITY-ST-ZIP			4.4 CIT	Y-ST	-ZIP					-
TITLE		☐ DELETE	5 1 TIT						Change	Addition
NAME			5 2 NA		ADDOCAC					
STREET ADDRESS	1				ADDRESS					
CITY-ST-ZIP		☐ DELETE	5.4 CIT 6.1 TIT		1-ZIP	<u> </u>			☐ Change	Addition
TITLE		☐ VELETE	6.2 NA						change	- Addition
NAME CTREET ADDRESS					ADDRESS					
STREET ADDRESS				(EFI						
CITY-ST-ZIP			6.4 CIT							ļ

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 13th changed, or on an attack ment with an address, with all other like empowered.

SIGNATURE: