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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

S66925

SU AND HUANG CORPORATION

FILED

Jan 23 1998 8:00am

Secretary of State

Principal Place of Business Mailing Address C/O JAMES KARL & ASSOCIATES 537 BALD EAGLE DRIVE MARCO ISLAND FL 33937 975 NORTH COLLIER BLVD. MARCO ISLAND FL 33934 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/15/1991 2, Principal Place of Business 2a. Mailing Address Applied For Not Applicable 65-0277498 Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. Yes 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name JEMMY SU C/O SU'S GARDEN 82 Street Address (P.O. Box Number is Not Acceptable) 537 BALD EAGLE DRIVE 83 MARCO ISLAND FL 33937 84 Zip Code 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 when reinstating) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition SU. JEMMY P.F. NAME 1.2 NAME STREET ADDRESS 226 PALMETTO DUNES CIR 1.3 STREET ADDRESS NAPLES FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE ☐ Change Addition NAME HUANG, JOE M.C. 2.2 NAME STREET ADDRESS 2137 51ST STREET SW 2.3 STREET ADDRESS CITY-ST-ZIP naples fl 2. 4 CITY-ST-ZIP TITLE DELETE 3.1 TATLE Change Addition NAME SU, JEMMY P.F. 3.2 NAME STREET ADDRESS 226 PALMETTO DUNES CIR 3.3 STREET ADDRESS CITY-ST-ZIP Naples fl 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change Addition NAME HUANG, JOE M.C. 4.2 NAME 2137 51ST STREET SW STREET ADDRESS 43 STREET ADDRESS CITY-ST-ZIP <u>naples</u> fl 4.4 CITY-ST-ZIP DELETE TITLE Change 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE ☐ DELETE 6.1 TITLE Channe Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6 4 CiTY-ST-ZIP

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 13 if changed, or on an attachment with an address