
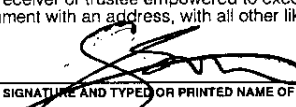


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 19, 2004 8:00 am
Secretary of State

08-19-2004 90053 032 ***150.00

DOCUMENT # V31182			
1. Entity Name HAAIEN-KOOI, INC.			
Principal Place of Business 10007 FACET COURT ORLANDO, FL 32836 US		Mailing Address 10007 FACET COURT ORLANDO, FL 32836 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
WANG, GEORGE S 4576 W. IRLO BRONSON MEMORIAL HIGHWAY KISSIMMEE, FL 34746		Name Street Address (P.O. Box Number is Not Acceptable) 10007 Facet Court City Orlando FL Zip Code 32836	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 STREET ADDRESS CITY-ST-ZIP	DP WANG, GEORGE S. R. 4576 W. IRLO BRONSON HIGHWAY KISSIMMEE, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10007 Facet Court Orlando, FL 32836
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS WANG, HENRY S. Y. 4576 W. IRLO BRONSON HIGHWAY KISSIMMEE, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10007 Facet Court Orlando, FL 32836
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WANG, HENRY S. Y. 4576 W. IRLO BRONSON HIGHWAY KISSIMMEE, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 10007 Facet Court Orlando, FL 32836
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. 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 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: 		8-10-04 407-256-3380	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

54068969



08022004 Chg-P CR2E034 (10/03)

4. FEI Number 59-3120219 Applied For Not Applicable

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