## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

(5)

OLIVATION I	DICKNOOL	CORPORATION
LHIMMILLIM	BILLINII .S	CHERT ROLL IN

Principal	Place	of	Husiness

Mailing Address

9099 SR 535

9099 SR 535



		ORLANDO FL 3283	Ò				
					3, Date Incorporated or Qualified 07/08/1992	3a. Date of Last R 05/01/1	•
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number		Applied For
<u> </u>		26 9101 S.R. 5	535		59-3177987		Not Applicable
Suite, Apt. #	, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	(V)	Additional Required
City & State		City & State			6. Election Campaign Financing	\$5 N	O May Be
3		28 Orlando, Fl	L		Trust Fund Contribution	1 1	d to Fees
$Z$ $\wp$	Country	Zip		Country	8. This corporation has liability for	intangible tax under s	199.032,
4	25	29 32836	30	Orange	Florida Statutes	No	,
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New R	egistered Agent	
				81 Name	abd - V		
YING, N	NELSON				nthia Yu	do)	
9099 S				910	ass (P.O. Box Number is Not Acceptable S.R. 535	ne)	
	IDO FL 32836			83			• • • • •
				84 Orty Or1	lando	FI 85 3	2836
11. Pursuant to	the provisions of Sections 607,050	2 and 607.1508, Florida Statu	tes, the a	above-named comora	ation submits this statement for the pur	pose of changing its r	enistered office
or registere	ed agent, or both, in the State of Flor i, and accept the obligations of Sec	rida. Such change was authori. Such 607-0505. Elorida Statuto	zed by th	ne corporation's board	d of directors. I hereby accept the app	bintment as registered	l agent. I am
	i, and accept the obligations of occ	Ton compose, Florida Statule		Cvnthia Yu	24/0/ 10	7.076 1702	
signature <sub>- s</sub>	Stputture, typed or printed name of registerous ager	rit and title if applicative (N		ered Agent signature required		7-876-1793	
		ND DIRECTORS	1:		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO	RS IN 12
H.E	D	☐ DELETE	1	1 TITLE		🔀 Change	Addition
NAME	YING, NELSON		1	2 NAME			
STREET ADDRESS	7123 CALOOSA COURT		I i	3 STREET ADDRESS Q14	01 S.R. 535		
DDY-81-7IP	ORLANDO FL				lando, F1 32836		
DISE		DELETE		1 TITLE VA		☐ Change	Addition
			,	'-'		_ ,	***
NAME							
					ING, NELSON JR.		
STREET ADDRESS			2	3 STREET ADDRESS 91	101 S.R. 535		
STREET ADDRESS		☐ DELETE	2 :	3 STREET ADDRESS 91 4 CITY-ST-ZIP OR		☐ Change	☐ Addition
STREET ADDRESS CONNIST ZIP		DELETE	2 : 2 : 3	3 STREET ADDRESS 91 4 CITY-ST-ZIP OR	101 S.R. 535	☐ Change	Addition
STREET ACCIDESS  CITY STEZIE  LITTE  NAME		☐ DELETE	2: 2: 3:	3 STREET ADDRESS 91 4 CHY-ST-ZIP OR 1 TITLE 2 NAME	101 S.R. 535	☐ Change	Addition
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coany man are innormal or more account in an 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.

SIGNATURE:

Nelson Ying, Director SIGNATURE AND VALUE OF PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

407-876-1793