


**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90093 025 ***150.00

DOCUMENT # P98000106088

1. Entity Name
RIGHT TIME GROUP, INC.



Principal Place of Business
**82-11 37TH AVENUE
SUITE #705
JACKSON HEIGHTS NY 11372
US**

Mailing Address
**82-11 37TH AVENUE
SUITE #705
JACKSON HEIGHTS NY 11372
US**

2. Principal Place of Business
67-83 GROTON STREET

3. Mailing Address
Suite, Apt. #, etc.

City & State
FOREST HILLS, NY 11375

City & State

Zip
11375

Country
QUEENS

Zip

Country

4. FEI Number **65-0883229**

Applied For
 Not Applicable

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



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MORELAND, DANIEL
4545 SW 152 AVE
HOLLYWOOD FL 33027**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing, Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D	<input type="checkbox"/> Delete
NAME JIN YOU, LIANG	
STREET ADDRESS 82-11 37TH AVENUE	
CITY-ST-ZIP JACKSON HEIGHTS NY 11372	
TITLE D	<input type="checkbox"/> Delete
NAME KIN YAU, LEUNG	
STREET ADDRESS 82-11 37TH AVENUE	
CITY-ST-ZIP JACKSON HEIGHTS NY 11372	
TITLE D	<input type="checkbox"/> Delete
NAME KWO YUK, LI	
STREET ADDRESS 82-11 37TH AVENUE	
CITY-ST-ZIP JACKSON HEIGHTS NY 11372	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME JIN YOU, LIANG	
STREET ADDRESS 67-83 GROTON STREET	
CITY-ST-ZIP FOREST HILLS, NY 11375	
TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME KIN YAU, LEUNG	
STREET ADDRESS 67-83 GROTON STREET	
CITY-ST-ZIP FOREST HILLS, NY 11375	
TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME KWO YUK, LI	
STREET ADDRESS 67-83 GROTON STREET	
CITY-ST-ZIP FOREST HILLS, NY 11375	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: **KIN YAU, LEUNG** **4/1/03** **718 263-2355**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)