

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

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 834521 (7)
1. Corporation Name
T.Y. LIN INTERNATIONAL



Principal Place of Business: **825 BATTERY ST SAN FRANCISCO CA 94111**
Mailing Address: **825 BATTERY ST SAN FRANCISCO CA 94111**

3. Date Incorporated or Qualified: **06/12/1975**
3a. Date of Last Report: **05/01/1995**
4. FEI Number: **94-1598707**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business (21-24) and Mailing Address (25-29) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: **PURTLE, GEORGE 7835 SUNNYMEADE DR N JACKSONVILLE FL 32211**
10. Name and Address of New Registered Agent (81-84) fields: Name, Street Address, City, 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: _____ (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: PD NAME: ZWELGHAG, SIMON STREET ADDRESS: 825 BATTERY ST CITY-ST-ZIP: SAN FRANCISCO CA	<input type="checkbox"/> DELETE	1.1 TITLE: ZWEIGHAFT, SIMON 1.2 NAME: ZWEIGHAFT, SIMON 1.3 STREET ADDRESS: 1.4 CITY-ST-ZIP:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DVP NAME: JAMES, TAI STREET ADDRESS: 825 BATTERY ST CITY-ST-ZIP: SAN FRANCISCO CA	<input type="checkbox"/> DELETE	2.1 TITLE: 2.2 NAME: 2.3 STREET ADDRESS: 2.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: S NAME: PETERSON, ROBERT A STREET ADDRESS: 825 BATTERY ST. CITY-ST-ZIP: SAN FRANCISCO CA	<input type="checkbox"/> DELETE	3.1 TITLE: 3.2 NAME: 3.3 STREET ADDRESS: 3.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VPD NAME: BERMAN, TOBY STREET ADDRESS: 5960 N MILWAUKEE AVE CITY-ST-ZIP: CHICAGO IL	<input type="checkbox"/> DELETE	4.1 TITLE: BERMAN, JOBY 4.2 NAME: BERMAN, JOBY 4.3 STREET ADDRESS: 4.4 CITY-ST-ZIP:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VP NAME: ASHLEY, MARK STREET ADDRESS: 5030 CCAMINO DE LA SIESTA # 204 CITY-ST-ZIP: SAN DIEGO CA	<input type="checkbox"/> DELETE	5.1 TITLE: 5.2 NAME: 5.3 STREET ADDRESS: 5.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	<input type="checkbox"/> DELETE	6.1 TITLE: CHAIRMAN OF THE BOARD 6.2 NAME: TANG, MAN-CHUNG 6.3 STREET ADDRESS: 825 BATTERY ST 6.4 CITY-ST-ZIP: SAN FRANCISCO, CA 94111	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 or changed, or on an attachment, with an address.

SIGNATURE: _____ DATE: **4/29/96** (415) 291-3700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)