

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

CORPORATION
ANNUAL REPORT

~~1995~~ 1998



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

FILED
Apr 28 1998 8:00am
Secretary of State

DOCUMENT # M11991

1. Corporation Name

Silver Star Enterprises, Inc.

Principal Place of Business

**454 N.W. 97 Place,
Miami, FL 33172**

Mailing Address

**454 N.W. 97 Place,
Miami, FL 33172**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

3a. Date of Last Report

July 18, 1985

2. Principal Place of Business

21 **9615 N.W. 47 Terr.**

Suite, Apt. #, etc.

22

City & St.

23 **Miami FL**

Zip

24 **33178**

Country

25 **US**

2a. Mailing Address

26 **9615 N.W. 47 Terr.**

Suite, Apt. #, etc.

27

City & State

28 **Miami FL**

Zip

29 **33178**

Country

30 **US**

4. FEI Number

59-2594463

Applied For

Not Applicable

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

9. Name and Address of Current Registered Agent

**Jose A. Santos, Jr., Esq.
Courthouse Tower - 18th Floor
44 West Flagler Street
Miami, FL 33130**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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 of agent, if applicable

(NOTE - Registered Agent's signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P/D
Adriaan Tsai-Soe-Fa
454 N.W. 97 Place, Miami**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
Shuk Kwan Chan
454 N.W. 97 Pl. Miami FL33172**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
Alwin Tjin A Kiet
454 N.W. 97 Pl. Miami FL33172**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
**P/D
Adriaan Tsai-Soe-Fa
9615 N.W. 47 Terr.
Miami, FL 33178**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
**V
Shuk Kwan Chan
9615 N.W. 47 Terr. Miami FL 33178**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
**T
Alwin Tjin A Kiet
9615 N.W. 47 Terr. Miami FL 33178**

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 if changed, or on an attachment with an address.

SIGNATURE: *Shuk Kwan Chan* **SHUK KWAN CHAN V.P.** **4/20/98** **(305) 591-0023**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #