FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 13, 1999 8:00 am
Secretary of State
04-13-1999 90026 030 ****61.25

DOCUMENT # N98000007123

1. Corporation Name
SOUTH FLORIDA TAIWANESE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3592 SATIN LEAF COURT CORAL SPRINGS FL 33065	3592 SATIN LEAF COURT CORAL SPRINGS FL 33065

2. Principal Place of Business 21
Suite, Apt. #, etc. 22
City & State 23
Zip 24 Country 25

2a. Mailing Address 26
Suite, Apt. #, etc. 27
City & State 28
Zip 29 Country 30

3. Date Incorporated or Qualifed: 12/17/1998

4. FEI Number: 65-0895543 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

CHANG, HUNGCHUN J
3592 SATIN LEAF COURT
CORAL SPRINGS FL 33065

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

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

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	CHANG, HUNGCHUN		1.2 NAME		
STREET ADDRESS	3592 SATIN LEAF COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33065		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	HUI WU, TSAI		2.2 NAME		
STREET ADDRESS	4001 NE 24TH AVE.		2.3 STREET ADDRESS		
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33064		2.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	CHIANG, HUILING		3.2 NAME		
STREET ADDRESS	10865 SW 38TH DR.		3.3 STREET ADDRESS		
CITY-ST-ZIP	DAVIE FL 33328		3.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	CHANG, NELSON		4.2 NAME		
STREET ADDRESS	6759 SW 88TH STREET, #C314		4.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33156		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	HSIANG, KUEI-TANG		5.2 NAME		
STREET ADDRESS	8504 SW 18ST. TERR.		5.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33157		5.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	HUANG, PAUL		6.2 NAME		
STREET ADDRESS	7705 CAMINO REAL, #B401		6.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33143		6.4 CITY-ST-ZIP		

14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Hungchun Chang 3/29/99 (954)7993224
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)