

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 9:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000045657 (2)

1. Corporation Name

HARVEST, INC.

Principal Place of Business

Mailing Address

**30751 SW 212 AVE
24TH FLOOR
MIAMI FL 33131
US**

**P O BOX 90200
24TH FLOOR
HOMESTEAD FL 33090
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 06/29/1993		3a. Date of Last Report 05/01/1994	
4. FEI Number 65-0420564		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

2. Principal Place of Business		2a. Mailing Address		4. FEI Number		Applied For	
21		26		65-0420564		Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired		<input type="checkbox"/>	
22		27		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/>	
City & State		City & State		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
23		28		9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Zip		Country		24		25	
29		30		81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
29		30		BAUKUO HAN		17030 S.W. 145 COURT	
29		30		83		84 City	
29		30		MIAMI,		FL	
29		30		85 Zip Code		33177	

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) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TSAI, JUNG H	1.2 NAME	TSAI, JUNG HUI
STREET ADDRESS	15270 SW 80TH ST APT #7	1.3 STREET ADDRESS	17030 S.W. 145 COURT
CITY - ST - ZIP	MIAMI FL	1.4 CITY - ST - ZIP	MIAMI, FL 33177
TITLE	V	2.1 TITLE	VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAN, CHING C	2.2 NAME	HAN, CHINGCHUNG
STREET ADDRESS	15270 SW 80TH ST APT #7	2.3 STREET ADDRESS	17030 S.W. 145 COURT
CITY - ST - ZIP	MIAMI FL	2.4 CITY - ST - ZIP	MIAMI, FL 33177
TITLE	V	3.1 TITLE	VICE PRESIDENT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAN, CHING J	3.2 NAME	HAN, CHINGJUNG
STREET ADDRESS	15270 SW 80TH ST APT #7	3.3 STREET ADDRESS	17030 S.W. 145 COURT
CITY - ST - ZIP	MIAMI FL	3.4 CITY - ST - ZIP	MIAMI, FL 33177
TITLE	SV	4.1 TITLE	SECRETARY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAN, EAUKUO	4.2 NAME	HAN, BAUKUO
STREET ADDRESS	15270 SW 80TH ST APT #4	4.3 STREET ADDRESS	17030 S.W. 145 COURT
CITY - ST - ZIP	MIAMI FL	4.4 CITY - ST - ZIP	MIAMI, FL 33177
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 110.07(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: Dean Kw Han f/20/95 246-7974
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR