

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

**Mar 18 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # **P94000021772 (6)**
1. Corporation Name
HC INC.



Principal Place of Business
**2940 NE 203RD STREET
SUITE C-106
N MIAMI FL 33180
US**

Mailing Address
**P.O. BOX 630002
MIAMI FL 33163-0002
US**

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

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

3. Date Incorporated or Qualified **03/21/1994** 3a. Date of Last Report **04/11/1996**

4. FEI Number **65-0497336** 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
**CHU, SHU ING
19305 NE 2ND AVE #2325
N MIAMI FL 33170**

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code **FL**

11. Pursuant to the provisions of Sections 607.0602 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 607.0605, Florida Statutes.

SIGNATURE _____ (NAME) _____ (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
	DP HUANG, STEVE	<input type="checkbox"/> DELETE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	2940 NE 203RD ST C-106	13 STREET ADDRESS	
CITY-ST-ZIP	N MIAMI BEACH FL 33180	14 CITY-ST-ZIP	
		21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		22 NAME	
		23 STREET ADDRESS	
		24 CITY-ST-ZIP	
		31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		32 NAME	
		33 STREET ADDRESS	
		34 CITY-ST-ZIP	
		41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		42 NAME	
		43 STREET ADDRESS	
		44 CITY-ST-ZIP	
		51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		52 NAME	
		53 STREET ADDRESS	
		54 CITY-ST-ZIP	
		61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		62 NAME	
		63 STREET ADDRESS	
		64 CITY-ST-ZIP	

14. I do 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 607, Florida Statutes; and that my name appears in Block 12, Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Steve Huang* **2-14-97**

CR2E034 (9/96)