

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 # **P94000090077 (6)**

1. Corporation Name

HUNT TECHNOLOGIES, INC.



Principal Place of Business

4816 NW 23 TERR
GAINESVILLE FL 32605

Mailing Address

4816 NW 23 TERR
GAINESVILLE FL 32605

2. Principal Place of Business

21 | 3131 N.W. 13th ST.

Suite, Apt., etc.

22 | 51

City & State

23 | Gainesville, Florida

Zip

24 | 32609

Country

25 | U.S.A

2a. Mailing Address

26 | 3131 N.W. 13th ST.

Suite, Apt., etc.

27 | 51

City & State

28 | Gainesville, Florida

Zip

29 | 32609

Country

30 | U.S.A

3. Date Incorporated or Qualified

12/12/1994

3a. Date of Last Report

05/01/1995

4. FEI Number

59-3279955

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

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

DAI, HAIQUAN
4816 NW 23 TERR
GAINESVILLE FL 32605

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

Dai Haiquan HAIQUAN DAI, president

4/6/96

DATE

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input checked="" type="checkbox"/> DELETE
NAME	DAI, HAIQUAN	
STREET ADDRESS	4816 NW 23 TERR	
CITY- ST- ZIP	GAINESVILLE FL	
TITLE	VSD	<input checked="" type="checkbox"/> DELETE
NAME	ZHAO, ALEX X	
STREET ADDRESS	5015 NW 24 TERR	
CITY- ST- ZIP	GAINESVILLE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY- ST- ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	DAI, HAIQUAN	
3. STREET ADDRESS	4816 NW 23rd Terr.	
4. CITY- ST- ZIP	Gainesville, FL 32605	
5. TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	ZHAO, ALEX X	
7. STREET ADDRESS	5015 NW 24th Terr.	
8. CITY- ST- ZIP	Gainesville, FL 32605	
9. TITLE	TSD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
10. NAME	MEI, CHANGJIANG	
11. STREET ADDRESS	720 SW 34th ST, C9	
12. CITY- ST- ZIP	Gainesville, FL 32607	
13. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME		
15. STREET ADDRESS		
16. CITY- ST- ZIP		
17. TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME		
19. STREET ADDRESS		
20. 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:

Dai Haiquan HAIQUAN DAI, president

4/6/96

(352) 376-5774

DATE

Telephone #

CR2E034 (12/95)