

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
 AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

FILED

Aug 13 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 # P96000079624 (8)

1. Corporation Name
TKEIA, INC.



Principal Place of Business 7500 NORTH WEST 41ST STREET MIAMI FL 33166	Mailing Address 7500 NORTH WEST 41ST STREET MIAMI FL 33166
--	--

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/25/1996		3a. Date of Last Report	
4. FEI Number 65-0696321		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 owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			

2. Principal Place of Business 21 1850 NW 84th Ave	2a. Mailing Address 26 1850 NW 84th Ave
Suite, Apt. #, etc. 22 114	Suite, Apt. #, etc. 27 114
City & State 23 Miami, Fla	City & State 28 Miami, Fla.
Zip 24 33126	Country 25
Zip 29 33126	Country 30

9. Name and Address of Current Registered Agent YOUNG, PHILIP 7500 NORTH WEST 41ST STREET MIAMI FL 33166		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	

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 *Philip Young* **Philip Young** **8/6/97**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HSIEH, CHIN LING		1.2 NAME	
STREET ADDRESS 7500 NORTH WEST 41ST STREET		1.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33166		1.4 CITY-ST-ZIP	
TITLE VP	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WANG, STEVEN		2.2 NAME	
STREET ADDRESS 7500 NORTH WEST 41ST STREET		2.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33166		2.4 CITY-ST-ZIP	
TITLE VP	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME YANG, YUE ING		3.2 NAME	
STREET ADDRESS 7500 NORTH WEST 41ST STREET		3.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33166		3.4 CITY-ST-ZIP	
TITLE D	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HSIEH, KANG SAN		4.2 NAME	
STREET ADDRESS 7500 NORTH WEST 41ST STREET		4.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33166		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	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	<input type="checkbox"/> DELETE	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 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 or Block 13 if changed, or on an attachment with an address.

CR2E034 (4/97)