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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000080405 (9)

RISING EAST INC.

Principal	Place of	Business

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

7007 8.W. 46 STREET MIAMI FL 33155 7007 S.W. 46 STREET MIAMI FL 33155-4613

2a. Mailing Address

Suite, Apt. #, etc.

FILED Sep 22 1997 8:00am Secretary of State



3a. Date of Last Report

Applied For Not Applicable

\$8.75 Additional

3. Date Incorporated or Qualified

5. Certificate of Status Desired

09/26/1996

22			[27]							ree i	nequired
City & Sta	te		City 28	& State				Election Campaign Financing Trust Fund Contribution			O May Be d to Fees
Zip		Country	Zip].	Country	У		8. This corporation has liability for inta			s. 199.032,
24	2.0	25	29		30			Florida Statutes		No	
		and Address of C	urrent Registered	Agent	81	Τ.	Name	10. Name and Address of New Regis	reted b	gent	
DU, XIAN PEI						'	Marne				ļ
13300 S.W. 58 TERRACE, #1 MIAMI FL 33183					82	: ;	Street Addres	ss (P.O. Box Number is Not Acceptable)			
MILA	MII LE 2010	N			83	-					
					<u> </u>	L					
					84	1	City		FL	85 Zij	p Code
office or agent. La	registered ag	gent, or both, in the	7.0502 and 607.15 State of Florida Su obligations of, Sec	ich change was at	uthorized by	y ti	named corpor he corporation	ration submits this statement for the purp n's board of directors. I hereby accept the	ose of re appr	changing pintment a	its registered as registered
SIGNATURE	Signature, typed	d or ponted name of registe	ond agent and the if apple	table (NOTE:	Registered Ag	on! :	signature required	when reinstating)	DATE		
12.		OFFICER	S AND DIRECTOR	S	13.			ADDITIONS/CHANGES TO OFFICER	IS AND	DIRECTO	ORS IN 12
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NAME STREET ADDRESS					4, 2 NAME 4 3 STREET		appree				J
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CITY-ST-ZIP TITLE				DELETE	4.4 CITY - S 5.1 TITLE	91.1	ZIF			Change	e Addition
NAME					5.2 NAME						
STREET ADDRESS					5.3 STREET		ODBESS				ļ
City-ST-ZIP					5.4 CITY-8		·]				
TITLE	 			☐ DELETE	6.1 TITLE	01-1	E.II			Change	e Addition
NAME				_	6.2 NAME						
STREET ADDRESS					6.3 STREET	I AD	ODRESS:				ľ
CITY-ST-ZIP					6.4 CITY - 5						
14. I do here information I am an c	on indicated officer o r dire	on this annual repo eter of the corporat	rt or supplemental	annual report is tru or trustee empowe	for the exe lie and acci lired to exec	əmp	ption stated in	n Section 119.07(3)(i), Florida Statutes. I ny signature shall have the same legal el as required by Chapter 607, Florida Stati	fect as ules; ar	if made u id that my	under oath; that

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