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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9700006332 (5)

SHOUGANG MIAMI, INC.

Secretary of State

FILED

Mar 17 1998 8:00am



Principal Place of Business Mailing Address					1 1001 SAN CIE JENN JABIN BELLE WEIN AND		(110 (191 199)
12810 SW 122ND AVE 12810 SW 122ND AVE							
MIAMI FL 331	86	MIAMI FL 33186		DO NOT WRITE	DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	IN ITTIO OF ACE	
					· ·		
2. Principal Place of Business 26. Mailing Address					01/16/1997 4. FEI Number	····	Applied For
21	ide of pushess	<u></u>			65-07/7219	 	Applied For
Suite, Apt.	# Alc	Suite, Apt. #, etc.			02 0111-17	00 70	Not Applicable
22		27		5. Certificate of Status Desired		Additional Regulred	
City & State		City & State					
23	•	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
	Zip Country Zip		Country				
24	25	├ ─ '	30		This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes □ No		
E7	9. Name and Address of Curren		30]		10. Name and Address of New Reg		
C44	 		81	Name		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
GAO, TIESHENG							
12810 \$W 122ND AVE MIAMI FL 33186			82	82 Street Address (P.O. Box Number is Not Acceptable) 83			
			83				
			"	[
			84	City		FL 85 Zi	p Code
11. Pursuant	to the provisions of Sections 607 0502	2 and 607 1508. Florida Statute	s the abov	e-named i	corporation submits this statement for the or		its registered
office or re	egistered agent, or both, in the State	of Florida. Such change was au	thorized b	y the corp	corporation submits this statement for the population's board of directors. I hereby accept	t the appointment i	as registered
	m tamiliar with, and accept the obliga	itions of, Section 607.0505, Flor	ida Statute	·\$.			
SIGNATURE Signature, typed or printed name of registered agent and trie if applicable (NOTE Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE		ORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	Addition
NAME	GAO, TIESHENG		1.2 NAME				
STREET ADDRESS	8225 SW 152ND AVENUE	NUE 1.3 S		T ADDRESS	DRESS		
CITY-ST-ZIP	ANALY EL ANADA		1.4 CITY -	\$T. 7IP	IP		
TITLE	SD			J. 2.0	Change Ado		Addition
NAME	LEI, XU		2.2 NAME		•		
STREET ADDRESS	8225 SW 152ND AVENUE 2.3S		1	T ADDRESS			
CITY-ST-ZIP			2.4 CITY-		•		1
TITLE			3.1 TITLE			Addition	
NAME	ZHANG, LIZHONG		3.2 NAME	T			
STREET ADDRESS	ARAM ANALAMAN ALIMAN IN			ADDRESS			1
CITY-ST-ZIP	141441 Pt 00400		3.4. CITY-				
TITLE	17 WW 1 F 00 100	DELETE	4.1 TITLE	O1-FIE		☐ Change	Addition
NAME			4.2 NAME	. 1			
	4.3 S			' [20000245: -03/17/980105	33 F.C. 3017	
STREET ADDRESS				ADDRESS		***8.7S	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-1	S1-ZIP	कर्कक्छ, (उ	Change	Addition
		m petric			20000245		. LJ AUGILIOI
NAME STORET ADDRESS	ADDRESS 5.3		5.2 NAME	4000500	20000245: -03/17/980105	201¢	
STREET ADDRESS			1	ADDRESS	***150.00		
CITY-ST-ZIP		DELETE	5.4 CITY - 5	SI-ZIP	****13U.UU	I Obc	Addition
TITLE		☐ nereit	6.1 TITLE			Li Change	Addition
NAME			6.2 NAME			$\gamma \sim \gamma$	\sim
STREET ADDRESS			6.3 STREE			\sim \sim	<i>(()</i>
CITY-ST-ZIP			6.4 CITY-5	ST-ZIP		7	

14. I 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.