

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT

1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
LOF CORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 10:42

DOCUMENT # S44119

(3)

1. Corporation Name

SZE-CHUAN, INC.

Principal Place of Business

483 CORTEZ RD W
BRADENTON FL 34207-1544

Mailing Address

483 CORTEZ RD W
BRADENTON FL 34207-1544

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/08/1991

3a. Date of Last Report

05/01/1994

4. FEI Number

65-0258523

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes

Yes No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22. City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27. City & State

28

Zip

Country

9. Name and Address of Current Registered Agent

ATTN: JOHN L.
13584 49 ST N
SUITE A
CLEARWATER FL 34622

10. Name and Address of New Registered Agent

81

Name SHIEH SHIN LUNG

82

Street Address (P.O. Box Number is Not Acceptable)

4143 51 AVE S

83

84

City ST. PETERSBURG

FL

85

Zip Code 33711

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PD
MA, KUO LUNG
4143 51 AVE S
ST PETERSBURG FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VD
MA, CHUNG SHIH
4143 51 AVE S
ST PETERSBURG FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

SD
SHIEH, SHIN LUNG
4143 51 AVE S
ST PETERSBURG FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

Change Addition

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

Change Addition

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

Change Addition

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

Change Addition

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

Change Addition

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

Change Addition

REMITTED BY PAGE 1

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 110.07(3)(b), 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 a director, or on an attachment with an address.

SIGNATURE:

Shin Lung Shieh

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Chapter/Section