PROFIT• CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATION

| ' | 19 98 4 | DIVISION OF COF | RPORATIONS | |
|---|---|--|--|--|
| DOCUMENT # s98238 | | | | 7 97 |
| P. Corporation | | | | Ern |
| | | | | 長部 岩 ガ |
| BTC LATIN, INC. | | | | |
| • | | | | EALS SEE |
| Principal Place of Business Mailing Address | | | | FILED JAN 23 A LAHASSEE. |
| 2004 NV 04mV 24m | | | | $\square_{\mathcal{O}_{i}} =$ |
| 2001 NW 84TH AVE | | | | SE O MUSIC |
| MIAMI FL 33122 MIAMI FL | | | 33122 | 3. Date Incorporated or Qualified 13. Date 1 ast Report |
| | | | | 12/02/1991 5/1/1996 |
| 2. Principal P | lace of Business | 2a. Mailing Address | | 4. FEI Number Applied For |
| 21 | | 26 | | 65-0305577 Not Applicable |
| Suite, Apt. | #, etc | Suite, Apt. #, etc. | | 5. Certificate of Status Desired \$8.75 Additional |
| City P. Stot | | City 8 State | | Fee Hequired |
| City & State | .1 | City & State | | 6. Election Campaign Financing Trust Fund Contribution State Added to Fees |
| Zip | Country | Zip | Country | R. This corporation has liability for intangible tax under s. 199.032, |
| 24 | 25 | 29 30 | | Florida Statutes Yes No |
| | Name and Address of Current | Registered Agent | | 10. Name and Address of New Registered Agent |
| 81 Name | | | | |
| YANG, SHU HUI MELODY 82 Street Address (P.O. | | | | ress (P.O. Box Number is Not Acceptable) |
| 4600 N.W. 93 DORAL COURT | | | | |
| MIAMI, FL 33178 | | | | |
| • | • | | 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 about 1 me they have been the ability forces. Section 607 9005. Eleving Statutes. | | | | |
| SIGNATURE | Shu Hui Me | | | 01-08-97 |
| SIGNATORE | Signature typed or printed name of registered agent | | egistered Agent signature requ | · · · · · · · · · · · · · · · · · · · |
| 12. | OFFICERS AND | DELETE | 13. 1.1 TITLE | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition |
| TITLE NAME | Þ | L. Dette | 1.2 NAME | |
| STREET ADDRESS | SU, STEEL | | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | 2001 NW 84TH AVE | MIAMI FL 331 | • | |
| TITLE | ጉ : | DELETE | 2.1 TITLE | Change Addition |
| NAME | CHUANG, TWEFUN | | 2.2 NAME | 5000020704453 -01/28/9701097009 ****103.75 ****103.75 |
| STREET ADDRESS | 2001 NW 84TH AVE | | 2.3 STREET ADDRESS | -01/28/9701097009 |
| CHY-SY-ZIP | MIAMI FL 33122 | | 2.4 CITY - ST-ZIP | ****183.75 ****183.75 |
| TITLE | S | DELETE | - 3.1 TITLE | Change Addition |
| NAME | YANG, SHU-HUI ME | LODY | 3.2 NAME | · · · · · · · · · · · · · · · · · · · |
| STREET ADDRESS | 2001 NW 84th ave | | 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP | |
| CITY-ST-7IP TITLE | MIAMI FL 33122 | DELETE | 4.1 TITLE | Change Addition |
| NAME • | P | | 4. 2 NAME | 500QQ2Q7Q445 . 3 |
| STREET ADDRESS | YU, KUN LUNG DAN | IEL | 4.3 STREET ADDRESS | -01/28/9701097010 |
| CITY-ST-ZIP | 2001 NW 84TH AVE | | 4.4 CITY - ST - ZIP | *****70.00 *****70.00 |
| TITLE | MIAMI FL 33122 | DELETE | 5.1 TITLE | Change Addition |
| NAME | | | 5.2 NAME | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | • |
| CITY-ST-ZIP | | D.F. Far | 5.4 CITY - ST - ZIP | At tare |
| TITLE | | DELETE | 61 TITLE | Change Addition |
| NAME | | | 6.2 NAME | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | |
| CITY-ST-ZIP | by certify that the information supplied | with this filing is voluntarily furnic | 6.4 CITY - ST - ZIP | alify for the exemption stated in Section 119.07(3)(k). Florida Statutes. |

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/96 305-477-4596

Daytime Phone #