FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 21 1997 8:00am Secretary of State

NOCUMENT # N/63 Asian American C	142		
Asian American C	hamber of Cor	nmerce,	Ind.
		•	
· .			
Principal Place of Business	Mailing Address		
			3. Date Incorporated or Qualified 3a. Date of Last Report
<u></u>			7-28-86
2. Principal Place of Business	2a. Mailing Address	c.u.l	4. FEI Number Applied For
21	26 PO Box 5	544	59-32/72,97 Not Applicable
Suite, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired Serviced Fee Required
City & Stato	City & State		6. Election Campaign Financing \$5.00 May Be
23	28 Winter Par	K, FL	Trust Fund Contribution Added to Fees
Zip Country	7ip	Country	8. This corporation has liability for intangible tax under s. 199.032,
24 25	29 32790 30	<u> </u>	Florida Statutes Yes No
9. Name and Address of Cur	rent Hegistered Agent	81 Name	10. Name and Address of New Registered Agent
			Maria A. Jettery
		82 Street A	ddress (P.O. Box Number is Not Acceptable) Chastara, Ferrell, Sims & Eiserman
		63	
		84 Čitv	1400 W. Fairbanks Ave, Suite 102
		84 City	Winter Park FL B 32789
11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-pamed 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 smeeton. Thereby necessiting appointment as registered agent. I am familiar with, and accept the objustions of, Section 617.0503, Florida Statutes.			
SIGNATURE Y Jawa / 1	pypery	···	-04/23/9701002032
Signature, Typed or printed name of registrary 12. OFFICE AS	agryk a idjulic if jipiscable (NOTE: R AND DIRECTORS	egislered Agent signature r	equired when reinstatia情绪转日1,25 DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DELETE	1.1 TITLE	P X Change Addition Additio
NAME		1.2 NAME	michelle Hamada
STREET ADDRESS		1.3 STREET ADDRESS	3791 Lake Mirage Blud.
CITY-ST-ZIP		1.4 City - ST-ZiP	Oriando, FL 32817
TITLE	☐ DELETE	2.1 TITL€	and change and the second of t
NAME		2.2 NAME	Maria A. Jeffery
STREET ADDRESS		2.3 STREET ADDRESS	1400 w. Fairbanks due, Suite 10a
CITY-ST-ZIP	DELETE	2 4 CITY-S1-ZIP 3 1 TITLE	Winter Pauls. FL 32789
NAME	Liutti	3.2 NAME	Toba D.T. Lie
STREET ADDRESS	· ·	3.3 STREET ADDRESS	7380 Sandlake Road, Suite 500
CITY-ST-7IP	į i	3 4. CITY - ST - 7IP	Orlando, FL 32B19
TITLE	☐ DELETE	41 Inte	D Change Addition
NAME		4. 2 NAMĚ	Mitchell Gordon
STREET ADDRESS		4.3 STREET ADDRESS	375 Douglas Ava, Suite 1010
CITY-ST-ZIP	A Diptire	4.4 CITY - S1 - ZIP	Altamonte Springs, FL 32714
Turk 11/10	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	5.1 TITLE	∑ Change ☐ Addition
NAME STREET ADDRESS	,xx (52 NAME 53 STREET ADDRESS	Mustapha Baksh 3725 Major Blvd., Suite 200
CITY-S1-ZIP	<i>5</i>	5.4 CITY-ST-ZIP	0 (lando, FL 32819
TITLE V	☐ DELETE	6.1 TITLE	D Change Addition
NAME		6.2 NAME	David Chona
STREET ADDRESS		6 3 STREET ADDRESS	8007 S. Orange Ave.
CITY-S1-ZIP		6.4 CITY-ST-2IP	Orlando, FL 32809
information indicated on this annual report of	or supplemental annual report is true	and accurate and	ated in Section 119.07(3)(i), Florida Statules. I further certify that the hat my signature shall have the same legal effect as if made under oath; that
I am an officer or director of the corporation appears in Block 12 or Block 13 if changed	n or the receiver or trustee empowers	ed to execute this re	port as required by Chapter 617, Florida Statutes; and that my name
SIGNATURE: J/WWW/ JCL/Suy / reasurer 2/13/97 407.629.1944			