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 # P95000034779 (5)

FILED Mar 11 1998 8:00am Secretary of State

UNINA	HUI METHOWEST, INC.		The second second							
Principal Place	e of Business	Mailing Addre	Mailing Address				E INST OLDN (DD)	i ivala ikili ibbi		
2407 8 HIAWASSEE RD ORLANDO FL 32835		ORLANDO F	2407 S. HIAWASSEE RD. ORLANDO FL 32835			DO NOT WRITE IN TH	HE EDACE			
US		US	US			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						04/28/1995			ļ	
2. Principal P	lace of Business	2a. Mailing Ac	2a. Mailing Address 26			4. FEI Number Applied For				
21		h- n					59-3312459 Not Applie			
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.7	5 Additional Required		
City & State	9	City & Stat	City & State			6. Election Campaign Financing	\$5.0	00 May Be		
23		28	4			Trust Fund Contribution	Trust Fund Contribution Added to Fees			
Zip	Country	Zip	, ' <u> </u>		'	8. This corporation owes or has paid the current year Intangible				
24	25	29	30			Personal Property Tax due June 30.	Yes	∐ No	4	
	g, Name and Address of Curr			81	Name	10. Name and Address of New Register	o Agent			
TANG, OIRG JIU TANG, QINGJIU					Name					
	07 S. HIAWASSEE RD.				Street Ad	dress (P.O. Box Number is Not Acceptable)			٦	
UF	RLANDO FL 32835			83					\dashv	
				84	City	F	85 Z	ip Code		
SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the Starm familiar with, and accept the obligations, typed a primed name of representations.	7				orporation submits this statement for the purpositation's board of directors. I hereby accept the admiration of the statement for the purpositation of the statement of the stat		g its registered as registered		
12.	OFFICERS A	ND DIRECTORS	1	13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECT	ORS IN 12]§	
FITLE	P		DELETE 1	1 TITLE			Chang	je 🔲 Additio	ω ξ	
NAME	tritial autoria	ang, Qinasi	<i>u</i> 1	1.2 NAME 1.3 STREET ADDRESS					5	
STREET ADORESS	1855 VISTA ROYALE BLVD	•	1						Ş	
CITY-ST-ZIP	ORLANDO FL	· · · · · · · · · · · · · · · · · · ·		4 CITY - S	1-ZIP			. Astron	<u> </u> }	
TITLE				1 TITLE			L.] Chang	e [] Additio	<i>"</i>] `	
NAME				.2 NAME					ſ	
STREET ADDRESS					ADDRESS				-	
CITY-ST-ZIP TITLE		———		4 CITY-:	SI-ZIP		Chang	e Additio	n	
NAME				2 NAME	1		and county			
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STREET ADDRESS			4.	.3 STREET	ADDRESS				Į.	
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NAME			5.	.2 NAME						
STREET ADDRESS			5.	3 STREET	ADDRESS					
CITY-ST-ZIP				4 CITY - S	T-ZIP			· • • • • • • • • • • • • • • • • • • •	_	
TITLE		L		1 TITLE			L Chang	e 🔲 Additio	ın	
NAME				2 NAME						
STREET ADDRESS					ADDRESS)					
CITY-ST-ZIP	ertify that the information compled	with this filing does s		4 CITY - S		in Section 119 07/3Vi) Florida Statutes I further	cortify that t	he information	\dashv	

rneredy certify that the information supplied with this filling does not quality 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 this 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

SIGNATURE:

QINGSIU TANG,