

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

FILED
Feb 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # 364963 (9)

1. Corporation Name
HONG KONG VILLAGE, INC.



Principal Place of Business 2211 SW 92 TERR FT LAUDERDALE FL 33324	Mailing Address 2211 SW 92 TERR FT LAUDERDALE FL 33324
---	---

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/02/1970	
21. Suite, Apt. #, etc	22. City & State	23. Zip	24. Country	25. Suite, Apt. #, etc	26. City & State
27. Zip	28. Country	29. Zip	30. Country	4. FEI Number 59-1395665	Applied For Not Applicable
g. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

g. Name and Address of Current Registered Agent

AGON, FERMIN
613 N. W. 7TH STREET
DANIA FL 33004

10. Name and Address of New Registered Agent

81. Name
 82. Street Address (P.O. Box Number is Not Acceptable)
 83.
 84. City
 85. Zip Code **FL**

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 _____ DATE _____
Signature, typed or printed name of registered agent and the date applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD AGON, FERMIN	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AGON, FERMIN	1.2 NAME	
STREET ADDRESS	613 NW 7TH ST	1.3 STREET ADDRESS	
CITY-ST-ZIP	DANIA, FL 00000	1.4 CITY-ST-ZIP	
TITLE	VD AGON, ALFRED A	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AGON, ALFRED A	2.2 NAME	
STREET ADDRESS	68 MIRACLE MILE	2.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES, FL 00000	2.4 CITY-ST-ZIP	
TITLE	SD DEEMEE, JULIA	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEEMEE, JULIA	3.2 NAME	
STREET ADDRESS	2211 SW 92 TERR #1803	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	3.4 CITY-ST-ZIP	
TITLE	PD AGON, CARLOS M	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AGON, CARLOS M	4.2 NAME	
STREET ADDRESS	2211 SW 92 TERR #1803	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	4.4 CITY-ST-ZIP	
TITLE	AS AGON, MAY	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AGON, MAY	5.2 NAME	
STREET ADDRESS	613 N W 7 ST.	5.3 STREET ADDRESS	
CITY-ST-ZIP	DANIA, FL 00000	5.4 CITY-ST-ZIP	
TITLE	AS CATTON, MARIA T.	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CATTON, MARIA T.	6.2 NAME	
STREET ADDRESS	2211 SW 92 TERR #1803	6.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	6.4 CITY-ST-ZIP	

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.

SIGNATURE:  **JULIA DEMEE** Date: **2/4/98** Daytime Phone #: **954-370-1910**

CR2E034 (10/97)