PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 513786 1. Corporation Name

ORIENTAL GIFTS INTERNATIONAL, INC.								
) 	EISH BILL GIGH O	IRII AIRII IRRI
Principal Place of Business Mailing Address							•••	
1601 BISCAYNE BOULEVARD 4121 SW 97TH PL B-18 OMN) MALL MIAMI FL 33165-5122						·		
B-18 OMN! MALL MIAMI FL 33165-5122 Miami FL 33132 US						DO NOT WRITE IN THI	SPACE	
US						3. Date Incorporated or Qualifed	_	
						09/22/1976		
Principal Place of Business 2a. Mailing Address						4. FEI Number	 	olied For
21 26						59-1740632		Applicable
Suite, Apt. #, etc.				l.		5. Certifcate of Status Desired	\$8.75 A Fee Re	
22		City & State						` -
City & State		28 City & State		-		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added-to	
Zip	Country	Zip	Country	/		8. This corporation owes the current year Ir	tangible	
24	25	29 3	0			Personal Property Tax.	Yes	□No
Name and Address of Current Registered Agent						10. Name and Address of New Registered	Agent	
TANK	S SIN VING		81	1	Name			
TANG SIN YING B-18 OMNI MALL			82	: 5	Street Addres	ss (P.O. Box Number is Not Acceptable)	*	
MIAMI FL 33132			83					
••••			65	<u> </u>				
			84	C	City	F	85 Zip C	Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the ab					amed corpor	ration submits this statement for the purpose of	f changing its	registered
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut	bonzed by	/ the	corporation	's board of directors. I hereby accept the appoint	ointment as reg	gistered
ţ	II lamilal with, and accept the obliga	10113 01, 0001011 007.13000, 1 10.10						
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered A					nature required w			
12.	OFFICERS AND DIRECTORS 13					ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO Change	RS IN 12 Addition
TITLE	T □ DELETE 1.1*						☐ Citarige	[] Addiagni
NAME [1.2 NAME 1.3 STREET ADDRESS				
STREET ADDRESS								
CITY-ST-ZIP TITLE	P DELETE 2.1			ST-ZI	-		Change	Addition
NAME				22 NAME				_
STREET ADDRESS	4404 OW OTTH DIACE			2.3 STREET ADDRESS				
CITY-ST-ZIP	P. 11 A. D. 41 C. 1		2. 4 CITY-5		ŀ			
TITLE	TS						☐ Change	Addition
NAME	TANGT, TAK SHUN	-	3.2 NAME		1		•	
STREET ADDRESS	4121 SW 97TH PLACE		3.3 STREE		DRESS			
CITY-ST-ZIP	MIAMI FL		3.4. CITY-		JP			
TITLE		☐ DELETE	4.1 TITLE		ĺ		Change	☐ Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 STREE					İ
CITY-ST-ZIP	-	□ DELETE	4.4 CITY-S	5T- Z1	P		☐ Change	Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME				□ Allaride	
NAME OTDEET LODDESS			5.3 STREE		DRESS			
STREET ADDRESS			5.4 CITY-S					ļ
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	□ DELETE	61 TITLE				Change	☐ Addition

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 trusted amproved 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

FILED Apr 02, 1999 8:00 am Secretary of State

04-02-1999 90071 029 ***150.00