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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Mar 04 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 572501

(5)

HOUSE OF CHINA, CRYSTAL & SILVER, INC.

110001	or orina, orrorae a or	Even into					
Principal Place	of Business	Mailing Address		<del></del>	-{	, PLO IL DIGUE HERE HERE BIRLE BIRLE	
5857 N UNIV D TAMARAC FL 3 US		5857 N UNIV DR TAMARAC FL 33321-4633 US	TAMARAC FL 33321-4633				
		•			3. Date Incorporated or Qualified 05/19/1978	3a. Date of Last F 02/14/1996	Report
2. Principal Pl	ace of Business	2a. Mailing Address 26			4. FEI Number 59-1819643	<b></b>	pplied For lot Applicable
Suite Apt # etc		Suite, Apt. #, etc.	.,		5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State		City & State	27   City & State		6. Election Campaign Financing	<del></del>	May Be
23		28			Trust Fund Contribution		to Fees
7 <sub>ip</sub>	Country Zip 29		Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
<u> </u>	9. Name and Address of Curre		1301		10. Name and Address of New F		
GILBERT L. COHEN, INC. 6144 N.W. 11TH STREET SUNRISE FL 33313				Name 2 Street Addre	GERSTMAN as (P.O. Box Number is Not Accept	able)	
0011	HOLIE GOOTS		6		1 140 10 147 0 54624	4-7	
				4 City	MARAC.		Code
11. Pursuant to office or reagent I are SIGNATURE	NY GERSTHA	A)	1	UM ST	oration submits this statement for the on's board of directors. I hereby acc	purpose of changing ept the appointment as	its registered s registered
12.	***************************************	ent and little d'applicable (NOT ND DIRECTORS	E: Registered	gent signature require	d when reinstating)  ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO	RS IN 12
lili(F	P	DELETE	1.1 TITU			Change	Addition
NAME	HERMAN GERSTMAN		1.2 NAM	E			
STREET ADDRESS	3710 INVERRARY DRIVE		1.3 STRE	ET ADDRESS			
CHTY+S1+ZIP	LAUDERHILL FL	The street		- ST- ZIP			- Augreina
lift.f	ST DELETE		2 1 7(1)			Change	Addition
NAME CENTER ADDRESS	RABINOWITZ, LINDA 5715 NW 48TH CT		2.2 NAM	ET ADDRESS			
STREET ADDRESS CITY-ST-ZIP	CORAL SPRINGS FL			r-ST-ZIP			
TILE	OGIFIC OF TRITOGET C	DELETE	3.1 TITU		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME			3.2 NAM	E			
STREET ADDRESS			3.3 STR	ET ADDRESS			
CHY-51-709			3.4. CIT	/-ST-ZIP			
T(T), F		☐ DELETE	4.1 Tritu	•		☐ Change	Addition
NAME			4. 2 NAN	AE .			
STREET ADDRESS			4.3 STR	ET ADDRESS			
CITY - ST - 709				-ST-2IP			
TITLE		L.) DELETE	5.1 TITL	·		Change	L. Addition
NAME			5.2 NAV				ļ
STREET ADDRESS				ET ADDRESS			
CHY-S1-ZIP		DELETE		-ST-2IP		Change	Addition
TITLE NAME		L) DECERT	6.1 NO.			C Culduge	L. Auditivit
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP				-ST-ZIP			Į
14. I do heret	by certify that the information supplie		fy for the	xemption stated	in Section 119.07(3)(i), Florida Statu	ites. I further certify the	it the
informatio Lam ac of	n indicated on this annual report or flicer or director of the corporation on h Block 12 or Block 13 if changed, (	supptemental annual report is to the receiver or trustee empoy	rue and vered to	curate and that	my signature shall have the same le as required by Chapter 607, Florida	gal effect as if made ui	nder oath; that