FIL	E NOW: FILM	FEE AF	TER MAY 1ST I	s \$550.00	FILED
CO	PROFIT RPORATION	A PI		TMENT OF STATE	Feb 09 1998 8:00am
l.	UAL REPORT		ndra B	. Mortham	
	1998		DIVISIONOFI	y Gig State	⇒ Secretary of State
DOCU 1. Corporation	MENT # 6	96285	(6)		
CHINA	FAIR, INC.		, ,		
Principal Place of Business Mailing Address					
3092 TAMIAMI TRAIL PT CHARLOTTE FL 33952 PT CHARLOTTE FL 33952					
					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
2 Principal F	Place of Business		2a. Mailing Address		07/28/1981 4. FEI Number Applied For
21	-lace of Business		26 _		4. FE! Number Applied For Not Applied For Not Applied For
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired Fee Regulred
City & Sta	te		City & State		6. Election Campaign Financing \$5.00 May Be
Zip	Cour		Zip	Country	Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year intangible
24	9. Name and Add	ress of Current R	29 egistered Agent	30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
CHAN, WAI SUM 81 Name Mark B. Ruchala					
				dress (SO. Box Number is Not Acceptable)	
				83	:
	•				Cape Coral FL 85 Zip Code 33990
11. Pursuant office or i	to the provisions of Se registered agent, or bo	ections 607.0502 a oth, in the State of I	nd 607.1508, Florida Statut Florida. Such change was a	es, the above-named co outhorized by the corpor	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
agent. I a SIGNATURE	Mark B	معرر ديمكر	la-		213198
12.	Signature, typed or printed na	me of registered agent an OFFICERS AND D		: Registered Agent signature req	ulred when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	S		DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	CHAN, JEAN 127 SW SINCLA	р ет		1.2 NAME	
STREET ADDRESS CITY - ST - ZIP	PT. CHARLOTTE			1.3 STREET ADDRESS 1.4 CITY-SY-ZIP	
TITLE	DP		DELETE	2.1 TITLE	Change Addition
NAME	CHAN, WAI SUN			2.2 NAME	
STREET ADDRESS CITY-ST-ZIP	127 S.W. SINCL PT. CHARLOTTE			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE	1. On Alleotte	1.2	DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME				3.2 NAME	<u></u>
STREET ADDRESS				3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE			DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	Change Addition
NAME				4. 2 NAME	
STREET ADDRESS				4.3 STREET ADDRESS	
CITY-ST-ZIP				4.4 CITY-ST-ZIP	
TITLE NAME			DELETE	5.1 TITLE 5.2 NAME	Change Addition
STREET ADDRESS				5.3 STREET ADDRESS	
CITY-ST-ZIP				5.4 CITY-ST-ZIP	
TITLE			DELETE	6.1 TITLE	Change Addition
NAME				6.2 NAME	
STREET ADDRESS				6.3 STREET ADDRESS	
14. I hereby o	certify that the informat	ion supplied with t	his filing does not qualify fo	■ 6.4 CITY-ST-ZIP r 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 it 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: 0-1/19-19-19-19-19-19-19-19-19-19-19-19-19-1					

SIGNATURE:

941-458-0845 Daytime Phone # 0433