


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

FILED  
May 05 1998 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1998</b>				FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # F17281 (9)</b> 1. Corporation Name <b>EVERGREEN ORIENTAL TRADING CO.</b>					
Principal Place of Business <b>7292 N.W. 54 STREET MIAMI FL 33166 US</b>			Mailing Address <b>7292 N.W. 54 STREET MIAMI FL 33166 US</b>		
DO NOT WRITE IN THIS SPACE					
3. Date Incorporated or Qualified <b>01/21/1981</b>					
2. Principal Place of Business 21 <b>P.O. Box 562483</b> Suite, Apt. #, etc. 22 <b>Miami FL</b> City & State 23 Zip 24 <b>33256</b> Country 25 <b>U.S.A.</b>				2a. Mailing Address 26 <b>P.O. Box 562483</b> Suite, Apt. #, etc. 27 <b>Miami FL</b> City & State 28 Zip 29 <b>33256</b> Country 30 <b>U.S.A.</b>	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>			8. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
9. Name and Address of Current Registered Agent <b>YUNG, CHUN W. 16360 S.W. 92ND COURT MIAMI FL 33157</b>			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City <b>FL</b> 85 Zip Code		
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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE <b>PSD</b> <input type="checkbox"/> DELETE NAME <b>YUNG, CHUN W.</b> STREET ADDRESS <b>7292 N.W. 54TH ST</b> CITY-ST-ZIP <b>MIAMI FL</b>			1.1 TITLE <b>PSD</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition 1.2 NAME <b>Yung, Chun W.</b> 1.3 STREET ADDRESS <b>7292 N.W. 54th St.</b> 1.4 CITY-ST-ZIP <b>Miami FL 33157 'N/A'</b>		
TITLE <b>VTD</b> <input type="checkbox"/> DELETE NAME <b>YUNG, KAM S.</b> STREET ADDRESS <b>7292 N.W. 54TH ST</b> CITY-ST-ZIP <b>MIAMI FL</b>			2.1 TITLE <b>VTD</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition 2.2 NAME <b>Yung, Kam S.</b> 2.3 STREET ADDRESS <b>16360 S.W. 92nd Ct.</b> 2.4 CITY-ST-ZIP <b>Miami FL 33157 'N/A'</b>		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY-ST-ZIP			6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 6.2 NAME 6.3 STREET ADDRESS 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: V. Pres. 4/25/98 (305) 2521615

CR2E034 (10/97)