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**Apr 08 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

1996 1997

DOCUMENT # F29295 (5)

**1. Corporation Name
WEN CHUNG DEVELOPMENTS, INC.**



Principal Place of Business Mailing Address
1247 SEA PLUME WAY SARASOTA FL 34242

2. Principal Place of Business 2n. Mailing Address
21 4924 FRUITVILLE RD Sultn, Apt. #, etc.
22 City & State
23 SARASOTA, FLORIDA Zip Country
4 34232 25 USA
26 4924 FRUITVILLE RD Sultn, Apt. #, etc.
27 City & State
28 SARASOTA, FLORIDA Zip Country
29 34232 30 USA

3. Date Incorporated or Qualified 04/13/1981 3a. Date of Last Report 03/15/1995
4. FEI Number 59-2087904 Applied For Not Applicable
6. Certificate of Status Desired **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent
CHUNG, WEN Y
1247 SEA PLUME WAY
VENICE, FLORIDA
SARASOTA FL 34242

10. Name and Address of New Registered Agent
81 Name CHUNG, WEN Y
82 Street Address (P.O. Box Number is Not Acceptable) 4924 FRUITVILLE RD
83
84 City SARASOTA FL 85 Zip Code 34232

11. Pursuant to the provisions of Sections 607.0502 and 607.1504, 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) **CHUNG, WEN Y** (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHUNG, WEN Y	1.2 NAME	
STREET ADDRESS	1247 SEA PLUME WAY	1.3 STREET ADDRESS	
CITY- ST- ZIP	SARASOTA FL	1.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY- ST- ZIP		2.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY- ST- ZIP		3.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY- ST- ZIP		4.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

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-04/11/97-01007-047
***165.00
cc/rw
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **WEN Y. CHUNG** 3/16/96 (44) 379-3300
WEN Y. CHUNG 4/1/97 (94) 379-3300
6355978 CP

CR2E034 (12/95)