FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # F76301

(3)

| OCEANIC | TOADING | INTERNATIONAL. | INC |
|----------------|-------------|----------------|---------|
| CJUJI PURILA | I DAI/IIICA | INTERNATIONAL. | HIME 4. |

Principa' Place of Business

SIGNATURE:

Mailing Address



| | 1609 N. TAMPA STREET TAMPA FL 33602 | | | | |
|---|--|---------------------------------|---|---|--------------------------------|
| | | | 3. Date Incorporated or Qualified 04/14/1982 | 3a. Date of Last Rep 04/24/1995 | |
| Business 2a. Mailing | Address | | 4. FEI Number | At | plied For |
| 26 | | | 59-2198965 | No | t Applicat |
| 27 | vpt. #, etc. | | 5. Certificate of Status Desired | □ \$8.75 / Fee Re | |
| 28 | | | Election Campaign Financing Trust Fund Contribution | S \$5.00 May Be Added to Fees | |
| Country Zip 29 | Gount 30 | ry | | □No | 99.032, |
| Name and Address of Current Registered Ag | ***** | <u> </u> | 10. Name and Address of New R | egistered Agent | |
| | 8 | 1 Name | | | |
| lin | 8 | 2 Street | Address (P.O. Box Number is Not Acceptab | le) | |
| PA ST | _ | | | | |
| 802 | 8 | 3 | | | |
| | 8 | 4 City | | FL 85 Zp | Code |
| ent, or both, in the State of Florida. Such change accept the obligations of, Section 607,0505, Floridation of registered agent and the frapple are | Oricla Statutes. (NOTE Registered Ag | | iquirod when reinstating) | DATE | |
| OFFICERS AND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFF | | |
| - | DELETE 1 1 THIL | 1 | | Change | Additio |
| OI, TAK CHIN D3 S CORTEZ AVE. | 1.2 NAM | ! | | | |
| | | ET ADDRESS | | | |
| MPA FL | 1.4 CiTY 1 DELETE 2 1 TITL | | | | |
| OY, YOON CHIN | . | 1 | | ☐ Change | ☐ Additio |
| 09 N. TAMPA ST | 2.2 NAMI | 1 | | | |
| MPA FL | | ET ADDRESS | | | |
| | 24 City DELETE 3 1 TITU | | | ☐ Change | ☐ Additio |
| IANG, SIEW HAR | 3.2 NAM | i | | L Change | Noonio |
| 33 WHISTLER CT. | | ET ADDRESS | | | |
| MPA FL | 3.4 CITY | | | | |
| | DELETE 4. 1 TITLE | | | Change | Additio |
| OI, YUET NGOR | 4.2 NAMI | | | <u> </u> | |
| 03 S. CORTEZ AVE. | | ET ADDRESS | | | • |
| MPA FL | 4.4 CITY | | | | |
| | DELETE 5 1 TITU | | | Change | Addition |
| OY, CHAN CHIN | 5 2 NAMI | . | | | _ |
| 998 ERLICH RD. | 53 STRE | ET ADDRESS | | | |
| MPA FL | 5.4 CITY | -ST-ZIP | | | |
| | DELETE 6 1 TITLE | | | Change | Additio |
| | 62 NAME | . | | | |
| | 6 3 STRE | et address | | | |
| | 6.4 CITY | ·ST-ZIP | | | |
| y that the info ormation in to n officer or the | | 6 2 NAM 6 3 STRE 6 4 CLTY | 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST-7/P | 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-7/P | 6 2 NAME 6 3 STREET ADDRESS |