

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F93000001218 (7)

1. Corporation Name

CHARMING ENTERPRISES COMPANY LIMITED

Principal Place of Business

P.O. BOX 1976
BOCA RATON FL 33429

Mailing Address

P.O. BOX 1976
BOCA RATON FL 33429



2. Principal Place of Business

2a. Mailing Address

21

26

State, Apt. #, etc.

State, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

SUSSKIND, HORST
4216 TRANQUILITY DR.
HIGHLAND BCH. FL 33487

3. Date Incorporated or Qualified

02/26/1993

3a. Date of Last Report

06/22/1995

4. FEI Number

65-0392156

Applied For

Not Applicable

5. 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. 193.032,
Florida Statutes

Yes ☐ No ☒

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0002 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 607.0004, Florida Statutes.

SIGNATURE

Signature of Registered Agent or Registered Agent in Charge

Signature of Board of Directors Representative or Officer

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	CD	☐ DELETE
NAME	MUANGKUL, CHAIPITI MR.	
STREET ADDRESS	19/6 2ND FL SOI PHETCHABURI 19 PHETCHABURI	
CITY, ST, ZIP	PHAYA THAI DISTRICT, BANGKOK	
2. TITLE	S	☐ DELETE
NAME	SUSSKING, H.	
STREET ADDRESS	4216 TRANQUILITY	
CITY, ST, ZIP	HIGHLAND BCH FL	
3. TITLE	T	☐ DELETE
NAME	SUSSKIND, DUENPEN	
STREET ADDRESS	4216 TRANQUILITY	
CITY, ST, ZIP	HIGHLAND BCH FL	
4. TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
5. TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		
6. TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY, ST, ZIP		

1. TITLE		☐ Change ☐ Addition
2. NAME		
3. STREET ADDRESS		
4. CITY, ST, ZIP		
5. TITLE		☐ Change ☐ Addition
6. NAME		
7. STREET ADDRESS		
8. CITY, ST, ZIP		
9. TITLE		☐ Change ☐ Addition
10. NAME		
11. STREET ADDRESS		
12. CITY, ST, ZIP		
13. TITLE		☐ Change ☐ Addition
14. NAME		
15. STREET ADDRESS		
16. CITY, ST, ZIP		
17. TITLE		☐ Change ☐ Addition
18. NAME		
19. STREET ADDRESS		
20. CITY, ST, ZIP		

14. I 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)(g), Florida Statutes. I further certify that the information contained 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

H. Suesskind *[Signature]* 2/1/96

FD-200 (12/95)

CR2E034 (12/95)