

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # F95000005370 (0)

1. Corporation Name

HONG FEI INTERNATIONAL, INC.

Principal Place of Business

PO BOX 353969
PALM COAST FL 32135-3969

Mailing Address

PO BOX 353969
PALM COAST FL 32135-3969



2. Principal Place of Business

21 537 N. Seminole Blvd
Suite, Apt. #, etc.

22 City & State

23 Orlando, FL

24 32807

25 D.S.A.

2a. Mailing Address

26 537 N. Seminole Blvd
Suite, Apt. #, etc.

27 City & State

28 Orlando, FL

29 32807

30 D.S.A.

9. Name and Address of Current Registered Agent

LU, LAWRENCE H
5 CARLSON PLACE
PALM COAST FL 32137

3. Date Incorporated or Qualified

10/31/1995

3a. Date of Last Report

4. FCI Number

39-1755005

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. 199.032,
Florida Statutes.

Yes No

10. Name and Address of New Registered Agent

81 Name

Lawrence H. Lu

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

3138 Terry Brook Dr #1408

83

84 City

Winter Park

FL

85 Zip Code

32792

11. Pursuant to the provisions of Sections 607.05(2) 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 607.20(2), Florida Statutes.

SIGNATURE

Lawrence H. Lu

Lawrence H. Lu

president

04/08/96

12. OFFICERS AND DIRECTORS

TITLE

PTDC

[] DELETE

NAME

LU, LAWRENCE H

STREET ADDRESS

5 CARLSON PLACE

CITY, ST, ZIP

PALM COAST FL 32137

TITLE

VSD

[] DELETE

NAME

ZHANG, LYDDIA L

STREET ADDRESS

5 CARLSON PLACE

CITY, ST, ZIP

PALM COAST FL 32137

TITLE

[] DELETE

NAME

STREET ADDRESS

CITY, ST, ZIP

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NAME

STREET ADDRESS

CITY, ST, ZIP

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(2)(b), 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 or person procured to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE:

Lydia L Zhang

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/08/96

(407) 111-0648

CR2E034 (12/95)