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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # G69940

(6)

FILED Apr 16 1997 8:00am Secretary of State

1. Corporation Name FONG RAEN ENTERPRISE CO., INC. Principal Place of Business 1951 NW 22ND STREET FT LAUDERDALE FL 33311 Mailing Address 1951 NW 22ND STREET FT LAUDERDALE FL 33311 FT LAUDERDALE FL 33311-2938						
1 1					3. Date Incorporated or Qualified 10/25/1983	3a. Date of Last Report 05/01/1996
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number 59-2378691	Applied For Not Applicable	
Suite, Apt	#. etc	Suite, Apt. #,	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State	<u> </u>		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28 Zip	Zip Country		Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,	
24	25 29 30			Florida Statutes	Yes X No	
WII	 Name and Address of Curr SHIH TZA 	rent Registered Agent		81 Name	10. Name and Address of New Re	gistered Agent
1951 NW 22 ST					ress (P.O. Box Number is Not Acceptal	nie)
FT LAUDERDALE FL 33311					Tess (1.0, box Hamoer is Not Noceptal	
				63		
				84 City		FL 85 Zip Code
SIGNATURE	Elgnature, typind or printed name of registered			Dy The Corporatutes. Agent signature requi	poration submits this statement for the tition's board of directors. I hereby accended when reinstating. ADDITIONS/CHANGES TO OFFICE.	DATE
TITLE	PST Wu, Shih Tza	☐ DE				☐ Change ☐ Addition
NAME STREET ADDRESS	1951 NW 22ND STREET		1.2 NA 1.3 ST	me Reet address		
CHTY - ST. 712	FT LAUDERDALE FL		1	Y-ST-ZIP		
1)TLE		DE	1	· 1		Change Addition
NAME STREET ADDRESS			2.2 NA	ME REET ADDRESS		
COY-SI-7IP				TY-ST-ZIP		
me.		☐ DE				Change Addition
NAME			3.2 NA	1		
STREET ADDRESS CITY-ST-ZIP				REET ADDRESS TY-ST-ZIP		
THILE		☐ DE				Change Addition
NAME			4. 2 N	UME		
STREET ADDRESS			4.3 ST	REET ADDRESS		
City St - Z.º		□ DE		Y-ST-ZIP		Change Addition
TITLE NAMI		یں لیا	5.1 TAT 5.2 NA	- 1		C change C vondout
STREET ADDRESS				REET ADDRESS		
C(TY+S)+Z(P)				ry-st-zip,		
THE		□ DE		· ' ' ' ' '	·	☐ Change ☐ Addition
NAME CORRES APPROVACE			6.2 NA	1		
STREET ADDRESS CITY+ST-ZIP				REET ADDRESS		ľ

14. I do 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 charged, or on an attachment with an address.

SIGNATURE:

IGNATURE AND VIDEO OR PRINTED NAME OF SONING OFFICER OR QUEECTOR

4/10 /97

954-484-7500 Dayting Phone #