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Apr 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # H00805

(2)

1. Corporation Name

NOBLE HOUSE ENTERPRISES, INC.

Principal Place of Business

C/O FRANCES C. KAO
8547 SIDON ST
ORLANDO FL 32817

Mailing Address

C/O FRANCES C. KAO
8547 SIDON ST
ORLANDO FL 32817-1654



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25 26 27 28 29 30

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

04/26/1984

3a. Date of Last Report

08/09/1996

4. FEI Number

59-2526670

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

9. Name and Address of Current Registered Agent

KAO, JENNIFER
8547 SIDON ST
ORLANDO FL 32817

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 607.0502 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 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	NAME	HO, DONNY K.	STREET ADDRESS	87 LAICHUK ROAD	CITY-STATE-ZIP	HONG KONG
TITLE	D	NAME	CHOW, RAFAEL Y.	STREET ADDRESS	52 ELLEN HALL SQ ONT	CITY-STATE-ZIP	ONT. CA
TITLE	PD	NAME	KAO, CHICHANG	STREET ADDRESS	8547 SIDON STREET	CITY-STATE-ZIP	ORLANDO FL
TITLE	D	NAME	KAO, CHUNNING	STREET ADDRESS	4409 ST. ANNE, PIERREFONDS	CITY-STATE-ZIP	CANADA, H9H2Z5
TITLE	S	NAME	KAO, JENNIFER S.	STREET ADDRESS	8547 SIDON STREET	CITY-STATE-ZIP	ORLANDO FL
TITLE	D	NAME	CHUNG, STEPHEN H.	STREET ADDRESS	311 PINEWOOD DR.	CITY-STATE-ZIP	THORNHILL ON CANADA L4J5S2

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	1.2 NAME	Francis KAO	1.3 STREET ADDRESS	8547 Sidon St.	1.4 CITY-STATE-ZIP	ORLANDO FL 32817-1654
2.1 TITLE	T. D	2.2 NAME	Chan, Alice K	2.3 STREET ADDRESS	8547 Sidon St	2.4 CITY-STATE-ZIP	Orlando FL 32817-1654
3.1 TITLE	D	3.2 NAME	Leung, Selina H	3.3 STREET ADDRESS	8547 Sidon St	3.4 CITY-STATE-ZIP	ORLANDO FL 32817-1654
4.1 TITLE		4.2 NAME		4.3 STREET ADDRESS		4.4 CITY-STATE-ZIP	
5.1 TITLE		5.2 NAME		5.3 STREET ADDRESS		5.4 CITY-STATE-ZIP	
6.1 TITLE		6.2 NAME		6.3 STREET ADDRESS		6.4 CITY-STATE-ZIP	

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 changed, or on an attachment with an address.

SIGNATURE:

Jennifer KAO March 20, 1997 (407) 679 8342

CR2E034 (9/96)