

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

FILED
May 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H10754 (0)

1. Corporation Name
BOOK CLUB, INC.



Principal Place of Business POST OFFICE BOX 8759 POMPANO FL 33075	Mailing Address POST OFFICE BOX 8759 POMPANO FL 33075
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/29/1984	
21	22	26	27	4. FEI Number 59-2711219	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23	24	28	29	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
Zip	Country	Zip	Country		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CHOY, WONG 10100 WEST SAMPLE ROAD SUITE 320 POMPANO BEACH FL 33065				81	Name CHOY, WONG		
				82	Street Address (P.O. Box Number is Not Acceptable) 9066 West Atlantic Blvd.,		
				83	Suite #416		
				84	City Pompano Beach	85	Zip Code FL 33071

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 for 1998 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]* **CHOY, WONG** DATE **4/30/98**

Signature, typed or printed name of registered agent and fee if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	<input type="checkbox"/> DELETE	1.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CHOY, WONG		1.2 NAME CHOY, WONG	
STREET ADDRESS 10100 WEST SAMPLE ROAD #320		1.3 STREET ADDRESS 9066 West Atlantic Blvd.,	
CITY-ST-ZIP POMPANO BEACH FL		1.4 CITY-ST-ZIP Pompano Beach FL 33071	
TITLE ST	<input type="checkbox"/> DELETE	2.1 TITLE ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CHOY, SAN MUI		2.2 NAME CHOY, SAN MUI	
STREET ADDRESS 10100 WEST SAMPLE ROAD #320		2.3 STREET ADDRESS 9066 West Atlantic Blvd., #416	
CITY-ST-ZIP POMPANO BEACH FL		2.4 CITY-ST-ZIP Pompano Beach FL 33071	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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 supplied on this 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 controller 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 amendment with an address.

SIGNATURE: *[Signature]* **P. HOY WONG** DATE **4/30/98** (009)752-2393

CR2E034 (10/97)