

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # H12848 (8)
1. Corporation Name
HONG KONG INVESTMENTS, INC.



Principal Place of Business Mailing Address
% JAMES CHAN 5303 S. COVE DR. LAKELAND FL 33809
% JAMES CHAN 5303 S. COVE DR. LAKELAND FL 33809

3. Date Incorporated or Qualified 07/18/1984
3a. Date of Last Report 05/01/1995
4. FEI Number 59-2679734 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
CHAN, JAMES
5303 S. COVE DR.
LAKELAND FL 33809
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 _____ (NOTE: Registered Agent signature required when re-registering) DATE _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|------------------|---|--|
| TITLE | DP | 11 TITLE | |
| NAME | CHEN, STEPHEN | 12 NAME | |
| STREET ADDRESS | 5303 S. COVE DR. | 13 STREET ADDRESS | |
| CITY - ST - ZIP | LAKELAND FL | 14 CITY - ST - ZIP | |
| TITLE | V | 21 TITLE | |
| NAME | YUOYU, BETTY | 22 NAME | |
| STREET ADDRESS | 5303 S. COVE DR. | 23 STREET ADDRESS | |
| CITY - ST - ZIP | LAKELAND FL | 24 CITY - ST - ZIP | |
| TITLE | SV | 31 TITLE | |
| NAME | CHAN, JAMES CHIT | 32 NAME | |
| STREET ADDRESS | 5303 S. COVE DR. | 33 STREET ADDRESS | |
| CITY - ST - ZIP | LAKELAND FL | 34 CITY - ST - ZIP | |
| TITLE | | 41 TITLE | |
| NAME | | 42 NAME | |
| STREET ADDRESS | | 43 STREET ADDRESS | |
| CITY - ST - ZIP | | 44 CITY - ST - ZIP | |
| TITLE | | 51 TITLE | |
| NAME | | 52 NAME | |
| STREET ADDRESS | | 53 STREET ADDRESS | |
| CITY - ST - ZIP | | 54 CITY - ST - ZIP | |
| TITLE | | 61 TITLE | |
| NAME | | 62 NAME | |
| STREET ADDRESS | | 63 STREET ADDRESS | |
| CITY - ST - ZIP | | 64 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(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: *[Signature]* 8/1/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)