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 # H37889

(3)

FILED Mar 11 1997 8:00am Secretary of State

CHL, INC.		· ·
icipal Place of Business	Mailing Address	t sådliðar daðar afrit senne helda skallið savr afalt daðat daðat den er afalt daðat dagat den er da afalt daðat

Principal Place of Business 1823 CYPRESS GARDENS BLVD. WINTER HAVEN FL 33884-1959		Mailing Address 1823 Cypress Gardens BLVD. Winter Haven Fl 33884-1859					
					3. Date Incorporated or Qualified 01/15/1985	3a. Date of Last 02/12/1996	
2. Principal P 21	lace of Business	2a. Mailing Address 26		······································	4. FEI Number 59-2494568		Applied For Not Applicable
Suite, Apt.	#, etc	Suite, Apt #, etc.			5. Certificate of Status Desired		Additional Required
City & Stat 23		City & State		·····	Election Campaign Financing Trust Fund Contribution		O May Be d to Fees
Zip 24	Country 25	Zip 29	30 Coun	lry		Yes 🔀 No	s. 199.032,
A. I.E.	9. Name and Address of Current	Registered Agent		31 Name /	10. Name and Address of New Ro	gistered Agent	
	N, CHIN SHU		Ľ	Name C	hen, Chin shu		
1823 CYPRESS GARDENS BLVD. WINTER HAVEN FL 33880			[4	Street Add	Address (P.O. Box Number is Not Acceptable)		
41041	TER TRAVERS TE GOODS		į.	3 ///	TE LOVO ROY	7)_	
				34 City /	12. LANE 1109	05 7	- Code
			,	" CIYW	inter Haven	FL 85 3	3884
11. Pursuant office or to accept La	to the provisions of Sections 607.0502 registered agent, or both, in the State (am familiar with, and accept the obliga	and 607,1508, Florida Statu of Florida, Such change was tions at Section 607,0605, F	ites, the abo authorized	ove-named co by the corporates	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of changing of the appointment a	its registered as registered
SIGNATURE	Chm Shu C		ionsa state		•	3/7/97	1
	Signature, typicd or proffed hance of registered agen	t and trie if applicable (NC		Agent signature req	uired when rainstating)	DATE	
12.	OFFICERS AND	DIRECTORS DELETE	13.	- 1	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO	
TITLE	CHEN, CHIN SHU	L.J DELETE	1.1 TITL 1.2 NAA	t r	DP CHEN, CHIN SHU.		: [] Addition
NAME STREET ADDRESS	1823 CYPRESS GARDENS BLD		1	EET ADDRESS A)r	
CITY - ST- ZIP	WINTER HAVEN FL			1-ST-ZIP	Winter Hallen F	-1 33886	Z
TITLE	D	DELETE	2.1 TITL				e Addition
NAME	CHEN, IRENE SHANMEI	_	2.2 NAM	ne l	CHEN IRENE SHE	SNMET	
STREET ADDRESS	1823 CYPRESS GARDENS BLD		23 STR	EET ADDRESS	117 E Lake Roy D.	Y Na cc	
CITY - ST - ZP	WINTER HAVEN FL		2 4 CIT	Y-SY-ZIP	CHEN IRENE SHO 117 É Lake Roy D. Winter Haven, FL	33.184	
THLE		DELETE	3 1 7(7)			Change	e 🔲 Addition
NAME	\		3.2 NAN				
STREET ADDRESS			4	EET ADDRESS			Į
City-St-72		FIGURE		Y-ST-ZIP			, Addata
1-TLF		DELETE	4.1 1111			L Change	e L Addition
NAME Construction absolutes			4. 2 NAI		•		
STREET ADORESS				EET AODRESS			
CHY-ST-ZIP TITLE		DELETE	4.4 GH	/-ST-ZIP		☐ Change	e Addition
NAME		the order	5.2 NAM				- 100111011
STREET ADDRESS				EET ADDRESS			}
City-SI-ZiP				(-ST-2 P			
TILE		☐ DELETE	61 THTL			Change	e Addition
NAML			62 NAN	AE		_	}
STHEET ADDRESS				EET ADORESS			
CITY -ST-7iP				-ST-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:

INTED NAME OF SIGNING OFFICER OR DIRECTOR