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

**PROFIT** CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Mar 31 1998 8:00am Secretary of State

1. Corporatio	MENT # <b>J73613</b> HINA, INC.	(8)			
Principal Plac	e of Business	Mailing Address		- 1 1801/HD 01/4 10003 19/10 01/01 91070 1/10 01/10 1	(8)( B18)( \$18)( B18)( B18)( 189)
827 S. WOOD		827 S. WOODLAND BLVI	)		
DELAND FL 32720-6870 DELAND FL 32720-6870					
				DO NOT WRITE IN TH	S SPACE
				3. Date Incorporated or Qualified	
9 Principal P	lace of Business	2a. Mailing Address		05/18/1987 4. FEI Number	
<u> </u>	Ido of Dusiness	26. Mailing Address		59-2807124	Applied For Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State	****	6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the o	current year Intangible
24	25	29	30	Personal Property Tax due June 30.	Yes No
9, Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent					
WALLACE, DAMIEL S.			61 Name	SHEE LEE	
431 N. GRANDVIEW AVE			82 Street Add	tress (P.O. Box Number is Not Acceptable)	
DAYTONA BEACH FL 32018		-	616 LAKKY DK		
			83		
			84 City	DELAND F	85 Zip Code 32720
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named conforation 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		her Lea-		·-	3/26/98
12,	Signature typed or protect name of agentimo agen OFFICERS AND		E: Registered Agent signature requ	ADDITIONS/CHANGES TO OFFICERS A	ND DIDECTORS IN 12
TITLÉ	D	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12 Change Addition
NAME	LEE, SHEE CHING		1.2 NAME		
STREET ADDRESS	440 N. PENINSULA DR		1.3 STREET ADDRESS		[8]
CITY-ST-ZIP	DAYTONA BEACH FL		1.4 CITY - ST - ZIP		1
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	LEE, IRENE	·	2.2 NAME		
STREET ADDRESS	440 N. PENINSULA DR		2.3 STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH FL		2.4 CITY-ST-ZIP		
TITLE	D	DELETE	3.1 TITLE		Change Addition
NAME	LEE, YUK PING		. 3.2 NAME		
STREET ADDRESS	440 N. PENINSULA DR		3.3 STREET ADDRESS		
CITY-ST-ZIP	DAYTONA BEACH FL		3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		1
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change
NAME (			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CiTY-ST-ZIP		Dobases District
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP	partify that the information supplied with	h this filing does not qualify for	6.4 CITY - ST - ZIP	Section 119 07(3)(i) Florida Statutas 1 further	certify that the information
indicated	on this argued report or supplemental	acqual report is true and acc	or are exemption stated if	n Section 119.07(3)(i), Florida Statutes, I further	Under eath: that I am an

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 air 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.

CNATURE:

SIZE 166

3 26/38 904-73676