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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22 1997 8:00am

Secretary of State

941-278-0006

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K04407

(8)

TUNG HING CORPORATION

SIGNATURE: (

Principal Plac	e of Business		Mailing Address				F INDINITO BUILD DIBLO BURIN BURIN I				
3805 FOWLER ST FT MYERS FL 33901 US			3605 FOWLER ST FT MYERS FL 33901-0903 US								
ŲS		•					3. Date Incorporated or Qualifie 11/30/1987		ate of Last R 25/1996	teport	
2. Principal Place of Business			28. Mailing Address			4. FEI Number			oplied For		
21			26			65-0013504			ot Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired		
22 City & State			City & State			8 Floring Compaign Financias		· · · · · · · · · · · · · · · · · · ·	<u>'</u>		
23			28			6. Election Campaign Financing Trust Fund Contribution	П		May Be to Fees		
Zip	Coun		Zip	Co	untry		8. This corporation has liability f				
24	25	2:	"1	30			Florida Statutes		□ No	. ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	9. Name and Add	ress of Current Req	istered Agent		Ι.,		10. Name and Address of New	Registered	Agent		
YAU	, LINDA NOREEN				81	Name					
3605 FOWLER ST			82 Street Add			Street A	ddress (P.O. Box Number is Not Accep	table)			
FT MYERS FL								,			
					83						
					84	City		FL	85 Zip	Code	
44 Duraunat	to the reminions of Co	olione 607 0E02 pag	EO7 1509 Florida Statut	lon tho n	bow.	named o	corporation submits this statement for th		f changing i	to registered	
office or r	registered agent, or bo	oth, in the State of Flo	orida. Such change was of, Section 607.0505, Fl	authorize	ed by	the corp	oration's board of directors. I hereby ac	cept the app	pointment as	registered	
SIGNATURE	Signative typical or printed na		60 d	T. D			equired when reinstating)	DATE			
12.		OFFICERS AND DIF	····	13.		ent signature r	ADDITIONS/CHANGES TO OF		DIRECTOR	RS IN 12	
TITLE	D		DELETE	1.1]		Т	7.02.110.10,0.11.110.10.10		Change	Addition	
NAME	YAU, LINDA NORI	EEN		1.21	IAME	1			•		
STREET ADDRESS	3605 FOWLER ST					ADDRESS					
CITY-ST-ZIP	FT. MYERS FL				IIY-S						
THLE	D		☐ DELETE	2.1 7	ITLE				Change	Addition	
NAME	YAU, JOHNNY			2.2 M	IAME						
STREET ADDRESS	3605 FOWLER ST	REET		2.3 9	TREET	ADDRESS					
CITY-ST-Z₽	FT. MYERS FL			2.4	CITY - :	ST-ZIP					
TITLE	D		☐ DELETE	3.1 7	ITLE				☐ Change	Addition	
NAME	CHEN, DANIEL C			3.2	IAME						
STREET ADDRESS	3605 FOWLER ST	HEEI		3.3 \$	TREET	ADDRESS					
CITY-ST-ZIP	FT. MYERS FL		D oc. ese			ST-ZIP			<u> </u>	1 4 5 100	
TITLE			☐ DELETE	4.1 3					L Change	Addition	
NAME					NAME						
STREET ADORESS						ADDRESS					
CITY - ST - ZIP TITLE			DELETE	4.4 C	ITY-S	1 - ZIP			Change	Addition	
NAME			m perese		AME	,			Unange	tal regioni	
STREET ADDRESS						ADDRESS					
CITY - ST-ZIP						T-ZIP					
TITLE			DELETE	6.11) - EIF			Change	Addition	
NAME				1	NAME						
STREET ADDRESS				1		ADDRESS					
CITY-ST-ZIP				1	CITY-S						

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.