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

ENTERPRISES

FILED May 15 1998 8:00am Secretary of State



					!
Principal Plac	ce of Business	Mailing Address			
101 W NEW MARKET RD 101 W NEW MARKET RD					
IMMOKALEE FL 33934		IMMOKALEE FL 33934		DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified	
				09/29/1988	
	Place of Business	2a. Mailing Address		4, FEI Number	Applied For
21		26		65-0078160	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		0.51.11.00.11.5	
23 City & Sta	te	<u>⊢</u> 1 ′		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	28	Country	This corporation owes or has paid the	
24	25		30	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Curre			10. Name and Address of New Register	ed Agent
Ch	IAN, KAM FU		81 Name		
102 NEW MARKET ROAD			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
IMMOKALEE FL 33934			OE Street Aut	arous (1.0) box (quinout to taut noueplable)	
MANAGEREE 1 E 00304			83		
			84 City		85 Zip Code
			1-1-7		•L
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	es, the above-named co	rporation submits this statement for the purpos	e of changing its registered
office or agent. I a	registered agent, or both, in the Stat am familiar with, and accept the obli	le of Florida. Such change was a gations of, Section 607.0505, Flo	rutnorizeo by the corpor orida Statutes	rporation submits this statement for the purpos ation's board of directors. I hereby accept the	appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered a		Registered Agent signature req		
12.		ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE	JAP P	☐ DESCRIE	1.1 TITLE	PRESIDEN!	S change - vocation
NAME	CHAN, KAM FU		1.2 NAME		
STREET ADDRESS	101 N NEW MARKET RD		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	IMMOKALEE FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	HING FUN, WONG		2.2 NAME		
STREET ADDRESS	101 W NEW MARKET RD		2.3 STREET ADDRESS		
CITY-ST-ZIP	IMMOKALEE FL		2. 4 CITY-ST-ZIP		
TITLE	MINOTOLEE 1 C	DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1 M 1	Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	<u></u>		4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		1111
STREET ADDRESS			5.3 STREET ADDRESS		ラス 1/2 /
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
		I I brieff	E CARITIE		
TITLE		☐ DELETE	6.1 TITLE	nnnnneess	Change Addition
TITLE NAME		C.) DEFEIE	6.2 NAME	0000025279	350
		D DETELE		0000025279 -05/18/9801135 ***150.00	350

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 atjachment with an address.