

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT 1996



FLOUIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **K78053 (1)**

1. Corporation Name
CHOY & FRAN, INC.



Principal Place of Business

Mailing Address

%FUNG CHEE CHOI
843 LINCOLN ROAD
MIAMI BEACH FL 33139

%FUNG CHEE CHOI
843 LINCOLN ROAD
MIAMI BEACH FL 33139

2. Principal Place of Business

2a. Mailing Address

21. Subj. Apt. #, etc.

26. Subj. 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

3. Date Incorporated or Qualified

3a. Date of Last Report

04/06/1989

04/26/1995

4. FEI Number

65-0111536

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

10. Name and Address of New Registered Agent

CHOI, FUNG CHEE
843 LINCOLN ROAD
MIAMI BEACH FL 33139

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 607.0602 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 I accept the obligations of, Section 607.0605, Florida Statutes.

SIGNATURE

Print Name of Registered Agent (if incorporated, Secretary, Treasurer, or Director)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11.1 NAME	PTV	CHOI, FUNG CHEE	<input type="checkbox"/> DELETE
11.2 STREET ADDRESS	843 LINCOLN ROAD	MIAMI BEACH FL	
11.3 CITY, STATE, ZIP	SD	CHOI, FUNG CHEE	<input type="checkbox"/> DELETE
11.4 STREET ADDRESS	843 LINCOLN ROAD	MIAMI BEACH FL	
11.5 CITY, STATE, ZIP			<input type="checkbox"/> DELETE
11.6 NAME			<input type="checkbox"/> DELETE
11.7 STREET ADDRESS			
11.8 CITY, STATE, ZIP			<input type="checkbox"/> DELETE
11.9 NAME			<input type="checkbox"/> DELETE
11.10 STREET ADDRESS			
11.11 CITY, STATE, ZIP			<input type="checkbox"/> DELETE
11.12 NAME			<input type="checkbox"/> DELETE
11.13 STREET ADDRESS			
11.14 CITY, STATE, ZIP			<input type="checkbox"/> DELETE

13.1 NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.5 NAME	
13.6 STREET ADDRESS	
13.7 CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.8 NAME	
13.9 STREET ADDRESS	
13.10 CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.11 NAME	
13.12 STREET ADDRESS	
13.13 CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY, STATE, ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I 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)(c), 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 of this report, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CHOI, FUNG CHEE

(305) 673-2218

CR2E034 (12/95)