SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) **PROFIT** FLORIDA DEPAREMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 **DIVISION OF CORPORATIONS DOCUMENT #** K8267 (1) MIAMI CHINESE TIMES, INC. Principal Place of Business Mailing Address 331 N.E. 18TH ST. 331 N.E. 18TH ST. MIAMI FL 33132 MIAMI FL 33132 3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1989 01/17/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0117552 Not Applicable Suite, Apt. #, etc. Suite Apt #, etc \$8.75 Additional Cert ficate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees  $Z_{10}$ Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name SHIH, ISAAC 331 N.E. 18TH ST. Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33132** 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 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. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607 0505, Florida Statutes. SECRETARY SIGNATURE (NOTE B) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. (96/8)PST TITLE DELETE 1.1 100 8 Change Addition SHIH, ISAAC NAME 1.2 NAME CR2E034 331 NE 18TH ST STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY - ST - ZIP 1.4 CITY - ST - ZIP TITLE DELFTE 21 111.8 Change Addition SHIH, ISAAC NAME 22 NAME 331 NE 18TH ST STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2 4 C/TY - ST - 2iP TITLE DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CHTY-ST-ZiP 3.4 CITY-ST ZIE TITLE DELETE 4.1.7111.6 Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIF 4.4 CITY - ST. ZIF TITLE DELETE 5.1 TIL. F Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-SI-ZIP 5.4 CITY - ST - ZIP THTLE DELETE 6 1 TITLE Change Addition 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP 6.4 CITY - ST - ZIP 14. Ido hereby certify that the information supplied with this filing is voluntarily formshed and does not qualify for the exemption stated in Section 119 07(3)(k). 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 it 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 617, Florida Statutes, and made under oath; that I am an officer or director of that my name appears in Block 12 or Block 13 if c ingeo, or on an attachment with an address FICER OR DIRECTOR WA CHON 06/06/96 (305)372-5509 SIGNATURE:

SIGNATURE AND TYPES OR PRINTED NAME OF