FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # (9) L16249 VISTAR SINO SERVICES, INC. Principal Place of Business Mailing Address 9095 S. A-1-A 3095 S. A-1-A MELBOURNE BEACH FL 32951 MELBOURNE BEACH FL 32951 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/15/1989 2a. Mailing Address 2. Principal Place of Business FEI Number 21 59-3082233 Suite, Apt. #. etc Suite, Apt. #, etc. 5. Certificate of Status Desired 22 City & State City & State 6, Election Campaign Financing 23 28 Trust Fund Contribution Zip Country Country 8. This corporation owes or has paid the current year Inlangible Yes 24 Personal Property Tax due June 30. 29 30 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MILLIUS, HIU YUEN 2227 ALBION AVE. 82 Street Address (P.O. Box Number is Not Acceptable) ORLANDO FL 32833 B3 84 City 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature, typed or prinled name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change TITLE 1.1 TITLE Toʻllmann, William M. MILLIUS, HIU YUEN 1.2 NAME NAME **3095 A1A HWY** 3095 S. A-1-A STREET ADDRESS 1.3 STREET ADDRESS MELBOURNE BCH FL 1.4 CITY - ST - ZIP Melbourne Beach, F1, 32951 CITY-ST-ZIP DELETE Change TITLE 2.1 TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change TITLE 3.1 TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 4.1 TITLE Change NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CiTY - ST - ZIP DELETE Change TITLE 5.1 THUE NAME 5.2 NAME 5.3 STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

TITLE NAME

FILED May 06 1998 8:00am Secretary of State



Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Zip Code

Addition

Addition

Addition

Addition

■ Addition

Addition

[] Change

85

Not Applicable

6.4 CITY-ST-ZIP 14. I 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 suppliemental 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

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE