

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L40019

1. Corporation Name

CHINA FAIR OF VENICE, INC.

Principal Place of Business
4189 S. TAMiami TRAIL
VENICE FL 34293

Mailing Address
4189 S. TAMiami TRAIL
VENICE FL 34293

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90143 044 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/29/1989

4. FEI Number

65-0175475

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CHOI, WAI LAM
4189 S. TAMiami TRAIL
VENICE FL 34293

10. Name and Address of New Registered Agent

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 607.0502 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☒ DELETE

TITLE D
NAME CHAN, WAI SUM
STREET ADDRESS 127 SW SINCLAIR ST.
CITY-ST-ZIP PT. CHARLOTTE FL

TITLE D
NAME CHAN, JEAN CHONG CHUN
STREET ADDRESS 127 SW SINCLAIR ST.
CITY-ST-ZIP PT. CHARLOTTE FL

TITLE D
NAME CHOI, WAI MAN
STREET ADDRESS 127 SW SINCLAIR ST.
CITY-ST-ZIP PT. CHARLOTTE FL

TITLE D
NAME CHOI, MANCY
STREET ADDRESS 127 SW SINCLAIR ST.
CITY-ST-ZIP PT. CHARLOTTE FL

TITLE DP
NAME CHOI, WAI LAM
STREET ADDRESS 127 SW SINCLAIR ST.
CITY-ST-ZIP PT. CHARLOTTE FL

TITLE D
NAME CHOI, MELISSA MEI MEI
STREET ADDRESS 127 SW SINCLAIR ST.
CITY-ST-ZIP PT. CHARLOTTE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

304 GLADESTONE BLVD
ENGLEWOOD, FL 34223

304 GLADESTONE BLVD
ENGLEWOOD, FL 34223

513 CEDARWOOD LN
VENICE, FL 34293

513 CEDARWOOD LN
VENICE, FL 34293

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E034 (11/98)