SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

32346

(2)

RUBY HITECH INTERNATIONAL CORPORATION						818H 818H 318H 818H 818H 818H 818H 1818
Principal Place	of Business	Mailing Address			{ 100/10/11 08/10/10 #400 11/11 0/11/0 84//	
5100 HOWELL BRANCH ROAD WINTER PARK FL 32792		5100 HOWELL BRANCH ROAD WINTER PARK FL 32792				
					3. Date Incorporated or Qualified 06/20/1990	3a. Date of Last Report 01/31/1995
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-3020729	Not Applicable
Suite, Apt i	f, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State	!	City & State			6. Election Campaign Financing	\$5.00 May Be
Z ip	Country Zip Country				Trust Fund Contribution	Added to Fees
24	25	29	30		8. This corporation has liability for in Florida Statutes	Yes No
24	9. Name and Address of Curren		100,		10. Name and Address of New Reg	istered Agent
CILI	, rachel .		81	Name		3.000
	NO HOWELL BRANCH ROAD		82	Street Adds	ress (P.O. Box Number is Not Acceptable	0)
	TE 100		02	outer Made	ess ().O. Box Number is Not Acceptable	,
	ITER PARK FL 32792		83			
***			84	City		FL 85 Zip Code
office or re	o the provisions of Sections 607.0503 egistered agent or both, in the State of Infamiliar with, and accept the obliga	of Florida. Such change was	authorized by	the corporate	oration submits this statement for the pu on's board of directors. Thereby accept	roose of changing its registered
SIGNATURE						
	Signature, typed or printed name of registered age:			ent signas ne requi	red when reinstating)	DATE
12.	OFFICERS AND	DELETE DELETE	13.	-	ADDITIONS/CHANGES TO OFFIC	Change Addition
TITLE NAME	LUAN, CHUN TI					
STREET ADDRESS			1.2 NAME 1.3 STREET	ADDBESS.		
CITY-ST-ZIP	WINTER PARK FL 32792		1.4 CHY - 5	1		
TITLE	S	DELETE	21 THILE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change Addition
NAME	CHEN, MEI-HUA		2.2 NAME			
STREET ADDRESS	5100 HOWELL BRANCH ROA	D	2 3 STREET	ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32792	•	2 4 CITY -	\$T-ZIP		
TITLE		DELETE	3 1 TITLE		•	Change Addition
NAME			3.2 NAME			
STREET ADORESS			33S1REE	ADDRESS		İ
CITY-ST-ZIP			3 4 CITY-	ST - ZIP		
THTLE		L DELETE	41 TITLE			Change Addition
NAME			4 2 NAME			
STREET ADDRESS				ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CiTY -:	51 - ZIP		Change Addition
TITLE			5 1 TITLE 52 NAME			V-mange Rodition
NAME CTREST ADDRESS				ADDRESS		
STREET ADDRESS			5.4 CITY -:	1		
CITY-ST-ZIP TITLE		DELETE	6.1 TITLE	31 - EII		Change Addition
NAME		State				- · ·
STREET ADDRESS			6 2 NAME 6 3 STREE	TADDRESS		
CITY-ST-ZIP			6 4 CITY -			
	by certify that the information supplied	d with this filing is voluntarily			lify for the exemption stated in Section 1	19 07(3)(k), Florida Statutes I

14. I do 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)(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 if made under oath, that I am an officer or director of trie corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 Tolyanged or on an attachment with an address

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR