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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Sucretary of State DIVISION OF CORPORATIONS

DOCUMENT # L98334

Principal Place of Business

(0)

SUPERCLONE CORP.

Mailing Address

FILED Mar 16 1998 8:00am Secretary of State

7204 NW 31ST ST 7204 NW 31ST ST MIAMI FL 33122 MIAMI FL 33122				DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 09/07/1990	
2. Principal Plac	ce of Business	2a. Mailing Add	tress		4, FEI Number	Applied For
1		26			65-0234168	Not Applicable
Suite, Apt. #.	, etc.	Suite, Apt. (*, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Co	untry	8. This corporation owes or has paid the cur	rent year Intangible
:4	25	29	30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Cur	rrent Registered Agent	, ,		10. Name and Address of New Registered	Agent
	I, KOOI CHOON			81 Name		
7204 NW 31ST ST MIAMI FL 33122			82 Street Address (P.O. Box Number is Not Acceptable)			
				83		
				84 City	FL	85 Zip Code
office or rec	the provisions of Sections 607.0 pistered agent, or both, in the St familiar with, and accopt the of	tate of Florida. Such cha	mae was authorize	ed by the corpo	orporation submits this statement for the purpose of ration's board of directors. I hereby accept the app	f changing its registered continent as registered

SIGNATURE	Signature, typed or product some of regulated agent and tilk if applicable (NOTE:	Registered Agent signature	e required whon reinslating) DATE
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	V DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	KOOI, CHOON, LIM	1.2 NAME	
STREET ADDRESS	7204 NW 31ST ST	1.3 STREET ADDRESS	· ·
CITY-S1-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	
TITLE	DELETE	2.1 TITLE	Change Addition
NAME		2.2 NAME	
STREET ADDRESS		23 STREET ADDRESS	
CITY - ST - ZIP		2 4 CITY - ST-ZIP	
TITLE	☐ DELETE	3 1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CHY-ST-ZIP		3.4. CITY - ST - ZIP	
TITLE	DELETE	4.1 TITLE	Change Addition
NAME		4. 2 NAME	
STREET ADDRESS		4 3 STREET ADDRESS	<u> </u>
CITY-ST-ZIP		4.4 City-St-ZiP	
TITLE	DELETE	5.1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5 3 STREET ADDRESS	
CITY-\$1-ZIP		5.4 CITY - ST - ZIP	
TITLE	☐ DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-S1-ZIP		6 4 CITY-ST-ZIP	

14. Thereby 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 changer, or on an attainment with any address.

SIGNATURE:

3/0/98