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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M66092 CHINA MAY, INC.

(1)

FILED

Apr 21 1997 8:00am

Secretary of State

Principal Place	or Business	Mailing Address	•						
#321 NORTH ST HOLLYWOOD F US		2321 NORTH ST. HOLLYWOOD FK US							
						 Date Incorporated or Qualified 01/27/1988 	3a. Date of Las 03/06/1990	e of Last Report 6/1996	
	ace of Business	2a, Mailing Addr	ess			4. FEI Number		Applied For	
e1		26				65-0030287		Not Applicable	
Suite, Apt. #, etc.		· · · · · ·	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional				
22			27					Required	
City & State		City & State				6. Election Campaign Financing		00 May Be	
23	Country	28	·· ·····	Country		Trust Fund Contribution		ed to Fees	
Zip	25	<u>├</u> ──┐	Zip Country 30			8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes			
25 29 3 9. Name and Address of Current Registered Agent			130	10, Name and Address of New Registered Agent					
KREI	LING, EDWARD PAUL			81	Namo				
	E 101			 	,				
	MIRAMAR PARKWAY	,		82 Street Address (P.O. Box Number is Not Acceptable)			e)		
	MAR FL 33023			83					
ini/V	mm411F 030E0								
Van				84	City		FL 85 Z	ip Code	
11. Pursuani I	o the provisions of Section	ons 607 0502 and 607 1508 Florid	da Statutes	the abov	e-named co	progration submits this statement for the o		n its registered	
office or re agent. I ar	egistered agent, or both, in familiar with, and acce	in the State of Florida. Such char pt the obligations of, Section 607.	ige was auth 0505, Florida	orized by a Statute	y the corpor s.	orporation submits this statement for the preation's board of directors. I hereby accept	the appointment	as registered	
SIGNATURE	Signature, typed or printed name of	of registered agent and little if applicable	(NOTE Re	·Bistered Ag	ent signature rec	quired when reinstaling)	DATE		
12.		FICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	PST	Of	LETE	1.1 TITLE			☐ Chang	e 🔲 Addition	
NAME	YU, MICHAEL			1.2 NAME					
STREET ADDRESS	6140 S.W. 32ND ST.	•		1.3 STREE	ADDRESS				
CITY-ST-ZIP	MIRAMAR FL			1.4 CHY-3	S1 - ZIP				
TITLE	D		LLE TE	2.1 TITLE			Chang	je 🔲 Addition	
NAME	YU, MICHAEL			2.2 NAME 2.3 STREET ADDRESS					
STREET ADDRESS	6140 S.W. 32ND ST.	•							
CITY-ST-2IP	MIRAMAR FL			2. 4 CITY-	ST-ZIP				
THILE	1		LLEIE :	3.1 TITLE			Chang	ge	
NAME			1	3.2 NAME					
STREET ADDRESS			Ŀ	33STREE	ADDRESS				
CITY-ST-ZIP		T-1 2.		3.4. CITY-	ST-ZIP				
TITLE		D8	LLT IL	4.1 TITLE			☐ Chang	ge L Addition	
NAME				4.2 NAME					
STREET ADDRESS				4 3 STREE	ADDRESS				
CITY-ST-ZIP		——————————————————————————————————————		4.4 C/TY- :	S1-ZIP				
TITLE		D DE	ittit	5.1 TITLE			Chang	ge	
NAME			ł	5.2 NAME					
STREET ADDRESS				5.3 STREE	I ADDRESS				
CITY-ST-ZIP				5.4 CITY-	S1-2IP			The Control	
AUTE		□ DI	iit It	6.1 TITLE			Chang	e Addition	
NAME				6.2 NAME					
STREET ADDRESS				63 STREE	ADDRESS				
CITY-ST-ZIP		San a		64 CITY-			12.00.00.00.00.00		
Information	n indicated on this annual ficer or director of the co	il report or supplemental annual r	oporl is true o empowere	and acc	urate and th	led in Soction 119.07(3)(i), Florida Statutes hat my signature shall have the same lega hort as required by Chapter 607, Florida S	offect as if made	under oath; that	