FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -7 AM 11:47

DOCUMENT # **M76727** **(0)**

1. Corporation Name
CHINA KING, INC.

Principal Place of Business	Mailing Address
165 NORTHEAST 8TH STREET HOMESTEAD FL 33030	165 NORTHEAST 8TH STREET HOMESTEAD FL 33030

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: **04/15/1988**
3a. Date of Last Report: **05/23/1994**

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

4. FEI Number: **65-0049300** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

~~WONG, PAK~~
~~10627 SW 88TH LANE~~
~~LEESIDE BLDG~~
~~MIAMI FL 33176~~

10. Name and Address of New Registered Agent

81 Name: CHI LEUNG CHAN
82 Street Address (P.O. Box Number is Not Acceptable): 165 NE 8 ST.
83: HOMESTEAD
84 City: FL 85 Zip Code: 33030.

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: x Chi Leung Chan — 2/22/94
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	~~VSD~~	1.1 TITLE	P/D	☐ Change ☒ Addition
NAME	~~CHIU, KWOK SAU~~	1.2 NAME	CHI LEUNG CHAN	
STREET ADDRESS	~~9720 SW 164 CT.~~	1.3 STREET ADDRESS	1080 N. FRANKLIN AVE APT. A	
CITY-ST-ZIP	~~MIAMI FL~~	1.4 CITY-ST-ZIP	HOMESTEAD. FL 33034	
TITLE		2.1 TITLE	V/P/D	☐ Change ☒ Addition
NAME		2.2 NAME	SHUI HONG CHAN	
STREET ADDRESS		2.3 STREET ADDRESS	1080 N. FRANKLIN AVE APT. A	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	HOMESTEAD. FL 33034	
TITLE		3.1 TITLE		☐ Change ☐ Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
CITY-ST-ZIP		3.4 CITY-ST-ZIP		
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

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)(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.

SIGNATURE: Chi Leung Chan — CHI LEUNG CHAN — 2/22/94 — 305-246-5282
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

000013 CP