

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**APPROVED  
AND  
FILED**

95 MAY -1 PM 9:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # N45429 (0)**  
1. Corporation Name  
**CORAL SPRINGS CHINESE CULTURE ASSOCIATION, INC.**

DO NOT WRITE IN THIS SPACE

|                                                                                                                                                                |                                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|
| 3. Date Incorporated or Qualified<br><b>10/03/1991</b>                                                                                                         | 3a. Date of Last Report<br><b>01/21/1994</b> |
| 4. FEI Number<br><b>65-0288150</b>                                                                                                                             | Applied For<br>Not Applicable                |
| 5. Certificate of Status Desired<br><input type="checkbox"/>                                                                                                   | <b>\$8.75</b> Additional Fee Required        |
| 6. Election Campaign Financing<br>Trust Fund Contribution<br><input type="checkbox"/>                                                                          | <b>\$5.00</b> May Be Added to Fees           |
| 7. Nonprofit with IRS 501(c)(3)<br>Tax Exempt Status<br><input checked="" type="checkbox"/>                                                                    | <b>\$68.75</b> Supplemental Fee Not Required |
| 8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes<br><input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                              |

|                                                                                         |                                  |                                                                               |                      |
|-----------------------------------------------------------------------------------------|----------------------------------|-------------------------------------------------------------------------------|----------------------|
| Principal Place of Business<br><b>1785 EAGLE TRACE BLVD.<br/>CORAL SPRINGS FL 33071</b> |                                  | Mailing Address<br><b>9110 NW 53 STREET<br/>CORAL SPRINGS FL 33067<br/>US</b> |                      |
| 2. Principal Place of Business<br><b>21</b>                                             | 2a. Mailing Address<br><b>26</b> |                                                                               |                      |
| Suite, Apt. #, etc.<br><b>22</b>                                                        | Suite, Apt. #, etc.<br><b>27</b> |                                                                               |                      |
| City & State<br><b>23</b>                                                               | City & State<br><b>28</b>        |                                                                               |                      |
| Zip<br><b>24</b>                                                                        | Country<br><b>25</b>             | Zip<br><b>29</b>                                                              | Country<br><b>30</b> |

|                                                                                                                               |  |                                                                                                                                                                                               |  |
|-------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 9. Name and Address of Current Registered Agent<br><b>CHAO, TAI SAN<br/>1785 EAGLE TRACE BLVD.<br/>CORAL SPRINGS FL 33071</b> |  | 10. Name and Address of New Registered Agent<br><b>81</b> Name<br><b>82</b> Street Address (P.O. Box Number is Not Acceptable)<br><b>83</b><br><b>84</b> City<br><b>FL</b> <b>85</b> 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 constituting)

DATE

|                                                    |                                                                  |                                                                    |                                                                                                                                                      |
|----------------------------------------------------|------------------------------------------------------------------|--------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------|
| 12. OFFICERS AND DIRECTORS                         |                                                                  | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12              |                                                                                                                                                      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | T<br>GOGOLEN, LIU F.<br>3981 NE 17TH AVENUE<br>FT. LAUDERDALE FL | 1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY - ST - ZIP | P/D<br>LUU, THANH<br>9202 NW 48TH STREET<br>SUNRISE, FL 33351<br><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition        |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | P<br>YUAN, CAROL<br>1121 NW 78TH AVENUE<br>PLANTATION FL         | 2.1 TITLE<br>2.2 NAME<br>2.3 STREET ADDRESS<br>2.4 CITY - ST - ZIP | T<br>CHIAO, CHEN-HOA<br>6450 NW 98TH LANE<br>PARKLAND, FL 33076<br><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition      |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | S<br>LU, YU-CHEN<br>2099 NW 11TH TERRACE<br>CORAL SPRINGS FL     | 3.1 TITLE<br>3.2 NAME<br>3.3 STREET ADDRESS<br>3.4 CITY - ST - ZIP | S/V/D<br>FENG, JAMES<br>1873 NW 113TH WAY<br>CORAL SPRINGS, FL 33071<br><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | D<br>CHIU, LUNG<br>9110 NW 53RD STREET<br>CORAL SPRINGS FL       | 4.1 TITLE<br>4.2 NAME<br>4.3 STREET ADDRESS<br>4.4 CITY - ST - ZIP | D<br>CHIU, LUNG<br>9110 NW 53RD STREET<br>CORAL SPRINGS, FL 33067<br><input type="checkbox"/> Change <input type="checkbox"/> Addition               |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | D<br>CHAO, TAI-SAN<br>1785 EAGLE TRACE BLVD<br>CORAL SPRINGS FL  | 5.1 TITLE<br>5.2 NAME<br>5.3 STREET ADDRESS<br>5.4 CITY - ST - ZIP | D<br>CHAO, TAI-SAN<br>1785 EAGLE TRACE BLVD<br>CORAL SPRINGS, FL 33071<br><input type="checkbox"/> Change <input type="checkbox"/> Addition          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP | D<br>LUU, THANH<br>9202 NW 48TH STREET<br>SUNRISE FL             | 6.1 TITLE<br>6.2 NAME<br>6.3 STREET ADDRESS<br>6.4 CITY - ST - ZIP | D<br>YUAN, CHESTER<br>1121 NW 78TH AVENUE<br>PLANTATION, FL 33322<br><input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition    |

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 190.07(3)(b), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Thanh Luu*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

THANH LUU

4/24/95 (305) 340-2226  
Date Daytime Phone #