

FILE NOW: FILING FEE IS \$61.25

FILED  
Mar 28 1997 8:00am  
Secretary of State

|                                                          |                                                                                   |                                                                                                           |
|----------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|
| NONPROFIT<br>CORPORATION<br>ANNUAL REPORT<br><b>1997</b> |  | FLORIDA DEPARTMENT OF STATE<br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|----------------------------------------------------------|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|

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



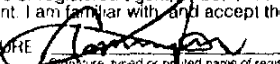
|                                                                                         |                                                                                    |
|-----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|
| Principal Place of Business<br><b>1765 EAGLE TRACE BLVD.<br/>CORAL SPRINGS FL 33071</b> | Mailing Address<br><b>9110 NW 53 STREET<br/>CORAL SPRINGS FL 33067-4624<br/>US</b> |
|-----------------------------------------------------------------------------------------|------------------------------------------------------------------------------------|

|                                                                                                                                                             |  |                                                                                                |  |                                                        |                                              |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------|--|--------------------------------------------------------|----------------------------------------------|
| 2. Principal Place of Business<br>21 <b>8343 W. Atlantic Blvd</b><br>Suite, Apt. #, etc.                                                                    |  | 2a. Mailing Address<br>26 <b>8343 W. Atlantic Blvd</b><br>Suite, Apt. #, etc.                  |  | 3. Date Incorporated or Qualified<br><b>10/03/1991</b> | 3a. Date of Last Report<br><b>01/25/1996</b> |
| 22 City & State<br>23 <b>Coral Springs, FL</b><br>Zip Country<br>24 <b>33071</b> 25 <b>USA</b>                                                              |  | 27 City & State<br>28 <b>Coral Springs, FL</b><br>Zip Country<br>29 <b>33071</b> 30 <b>USA</b> |  | 4. FEI Number<br><b>65-0288150</b>                     | Applied For<br>Not Applicable                |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                   |  |                                                                                                |  | \$8.75 Additional Fee Required                         |                                              |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>                                                                             |  |                                                                                                |  | \$5.00 May Be Added to Fees                            |                                              |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |  |                                                                                                |  |                                                        |                                              |

9. Name and Address of Current Registered Agent  
**CHAO, TAI SAN  
1765 EAGLE TRACE BLVD.  
CORAL SPRINGS FL 33071**

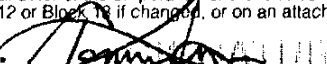
10. Name and Address of New Registered Agent  
81 Name **Tommy Lam**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**8343 W. Atlantic Blvd**  
83  
84 City **Coral Springs, -** FL 85 Zip Code **33071**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE  **Tommy Lam** President **1/3/97**  
(NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS |                                               | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |                                                                                             |
|----------------------------|-----------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------------------------------------|
| TITLE                      | D <input checked="" type="checkbox"/> DELETE  | 1.1 TITLE                                             | Vice-President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME                       | LUU, THANH                                    | 1.2 NAME                                              | Johanna Tang                                                                                |
| STREET ADDRESS             | 9202 NW 48TH STREET                           | 1.3 STREET ADDRESS                                    | 10442 NW 50th Place                                                                         |
| CITY-ST-ZIP                | SUNRISE FL                                    | 1.4 CITY-ST-ZIP                                       | Coral Springs, FL 33076                                                                     |
| TITLE                      | VP <input checked="" type="checkbox"/> DELETE | 2.1 TITLE                                             | President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition      |
| NAME                       | LAM, TOMMY                                    | 2.2 NAME                                              | Lam, Tommy                                                                                  |
| STREET ADDRESS             | 2484 NW 88 TERR.                              | 2.3 STREET ADDRESS                                    | 2484 NW 88 Terrace                                                                          |
| CITY-ST-ZIP                | CORAL SPRINGS FL                              | 2.4 CITY-ST-ZIP                                       | Coral Springs, FL 33065                                                                     |
| TITLE                      | P <input checked="" type="checkbox"/> DELETE  | 3.1 TITLE                                             | Vice-President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME                       | FENG, JAMES                                   | 3.2 NAME                                              | Feng, James                                                                                 |
| STREET ADDRESS             | 1873 NW 113TH WAY                             | 3.3 STREET ADDRESS                                    | 1873 NW 113th Way                                                                           |
| CITY-ST-ZIP                | CORAL SPRINGS FL                              | 3.4 CITY-ST-ZIP                                       | Coral Springs, FL                                                                           |
| TITLE                      | D <input checked="" type="checkbox"/> DELETE  | 4.1 TITLE                                             | Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition      |
| NAME                       | CHIU, LUNG                                    | 4.2 NAME                                              | AFONSO WONG                                                                                 |
| STREET ADDRESS             | 9110 NW 53RD STREET                           | 4.3 STREET ADDRESS                                    | 4811 NW 104 Terrace                                                                         |
| CITY-ST-ZIP                | CORAL SPRINGS FL                              | 4.4 CITY-ST-ZIP                                       | Coral Springs FL 33076                                                                      |
| TITLE                      | D <input type="checkbox"/> DELETE             | 5.1 TITLE                                             |                                                                                             |
| NAME                       | CHAO, TAI-SAN                                 | 5.2 NAME                                              |                                                                                             |
| STREET ADDRESS             | 1765 EAGLE TRACE BLVD                         | 5.3 STREET ADDRESS                                    |                                                                                             |
| CITY-ST-ZIP                | CORAL SPRINGS FL                              | 5.4 CITY-ST-ZIP                                       |                                                                                             |
| TITLE                      | D <input type="checkbox"/> DELETE             | 6.1 TITLE                                             |                                                                                             |
| NAME                       | YUAN, CHESTER                                 | 6.2 NAME                                              |                                                                                             |
| STREET ADDRESS             | 1121 NW 78TH AVENUE                           | 6.3 STREET ADDRESS                                    |                                                                                             |
| CITY-ST-ZIP                | PLANTATION FL                                 | 6.4 CITY-ST-ZIP                                       |                                                                                             |

14. I do hereby 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:  **Tommy Lam** President **1/3/97** **954-723-4966**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0025579

CR2E037 (9/96)