## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT** 

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**POCUMENT** # N93000004662 (3)

CHINESE FEDERATION OF FLORIDA, INC.

## **FILED** Apr 10 1998 8:00am Secretary of State

ate Incorporated or Qualified	 -

Principal Place of Business Mailing Address			1100	ISOL BIA IDIDE IIKI			Billi Didio Billi	I DITTU ITUT TUGI						
1164 W. FLA GLER ST 1164 W. FLAGLER MIAMI FL 33130 MIAMI FL 33130		ŀ	3. Date Incorporated or Qualified											
US US		<u> </u>	10/08/1993											
ļ								- 1	4. FÉI Num				_	Applied For
2. Principal P	lace of Busin	1655	1 2a.	Mailing Addre					007	0439008				Not Applicable
21	26					5. Certificat	te of Status D	esired 			Additional Required			
Suite, Apt.	Suite, Apt. #, etc.   Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May Be								
22 27 City & State City & State						nd Contributio		<u> </u>		to Fees				
23	28					7. Is this nonprofit corporation a homeowners association?								
Zip		Country	1201	Zip		Country			8. This corr	poration owes				ntangible
24		25	29		30					Property Tax				□ No _
	9. Name	and Address of Curr	ent Regis	tered Agent					10. Name ar	nd Address o	New R	egistered	Agent	
						81	Nam	ie						
CHU, AM	YNOHTN					82	Stree	et Address	(P.O. Box N	lumber is Not	Accepta	ble)		
1	FLAGLER	STREET				<u></u>	<u></u>						<u> </u>	
Miamifi	L 33135					83								i
						84	City	····					85 Zir	Code
44 0	4-44-			47.4500 EL 14	O1-4-4 41-			<del> </del>	E	AL !		<u> </u>	<u> </u>	<u> </u>
office or r	to the provis egistered ag	ions of Sections 617.09 ent, or both, in the Sta th, and accept the obli	te of Flori	17.1508, Florida da. Such chang	a Statutes, th e was author	e above rized by	e-name ( the co	ed corpora orporation	ation submits 's board of d	i this statemer lirectors. I her	nt for the eby acce	purpose o pt the app	or changing pointment a	its registered
1	ım familiar wi	th, and accept the obli	igations of	I, Section 617.0	503, Florida	Statutes	3.							ļ
SIGNATURE .	Signature, typed	or printed name of registered a	ment and title	ff applicable	(NOTE: Regi	stered Ace	ent signati	ture required v	when reinstating)			DATE		
12.		OFFICERS A				13.				IS/CHANGES	TO OFFI		DIRECTO	PRS IN 12
TITLE	D			DEL	ETE 1	1.1 TITLE							Change	Addition
NAME	FERNAN	IDO, MAY			1	1.2 NAME						•		ľ
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CITY-ST-ZIP	MIAMI F	<u>L</u>				1.4 CITY - S	T-ZIP							
TITLE	D	440000		DEL		2.1 TITLE							☐ Change	Addition
NAME		, andres . Flagler St			i '	2.2 NAME	4000506							1
STREET ADDRESS	MIAMI F					2.3 STREET		•				•		
CITY-ST-ZIP TITLE	PD	<b>-</b>		☐ DEL		2. 4 CITY-5 3.1 TITLE	91-4IF_			<del></del>			Change	Addition
NAME	SHO YI	J WEN				3.2 NAME		1					- •	1
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CITY-ST-ZIP		L 33135				3.4. CITY - S	ST-ZIP							
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STREET ADDRESS		-FLAGLER STREET				1.3 STREET						2>-	ı /	
CITY-ST-ZIP		<del>L-83195 -</del>		DEL		I.4 CITY-S	1-21P	77.	LAUDE	RDALE	H.	223	Change	Addition
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NAME STREET ADDRESS	TSAJ, JO	)HN /. FLAGLER ST				5.2 NAME 5.3 STREET	ADDDEAG							
CITY-ST-ZIP	MIAMI F					5.3 STREET 5.4 CITY - S		°						}
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NAME	CHU. AI	YMOHTM				5.2 NAME		1					.— •	}
STREET ADDRESS		FLAGLER ST				5.3 STREET	ADDRESS	s						
CITY-ST-ZIP	MIAMI F					5.4 CITY-S								l
		e information supplied	with this f	iling does not q				ated in Se	ction 119.07(	(3)(i) Florida	Statutes.	further c	ertify that th	e 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: