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

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

FILED Jan 16 1998 8:00am Secretary of State

CHIN-I	U ENTERPRISES CO, INC	i						!
Principal Plac	e of Business	Mailing Add	iress) to allow the monda liver rates there that while and	miani eteti diai	
1551 FOXDEN ROAD APOPKA FL 32712-3003 US		apopka f	1551 FOXDEN ROAD APOPKA FL 32712-3003 US			DO NOT WRITE IN THIS	SPACE	
00		03				3. Date Incorporated or Qualified		
						10/24/1984		
2. Principal P	lace of Business	2a. Mailing	Address			4. FEI Number	An	plied For
21		26				59-2422951		t Applicable
Suite, Apt	#, etc.		pt. #, etc.				\$8.75	
22		27				5. Certificate of Status Desired	Fee Re	quired
City & State	e	City & S	tate			6. Election Campaign Financing	\$5.00	Мау Ве
23		28				Trust Fund Contribution	Added to	o Fees
Zip	Country	Zip	<u> </u>	_ Country	У	8. This corporation owes or has paid the cur		
24	25	29	30	<u> </u>				No .
	9. Name and Address of Curre	ant Registered Ag	ent	81	Name	10. Name and Address of New Registered	agent	·
	Tu, Joseph R.			181	Name			
	51 FOXDEN ROAD			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
AP	OPKA FL 32712			83				
				63				
				84	City	FL	85 Zip C	>ode
11. Pursuant	to the provisions of Sections 607.05	502 and 607,1508.	Florida Statutes.	the abov	e-named co		changing its	s registered
office or r	egistered agent, or both, in the Sta	te of Florida. Such	change was aut	horized b	y the corpor	orporation submits this statement for the purpose of atlon's board of directors. I hereby accept the app	ointment as	registered
agent, i a	m familiar with, and accept the obli	gations of, Section	607.0505, FIORIC	sa Statute	s.			}
SIGNATURE	Signature, typed or printed name of registered a	gent and title if applicable	(NOTE: R	edistered Ac	ent signature reg	uired when reinstating) DATE		
12.		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTOR	\$ IN 12
TITLE	VST		DELETE	1.1 TITLE			Change	Addition
NAME	TETU, JOSEPH R.		İ	1.2 NAME	ļ			ĺ
STREET ADDRESS	1551 FOXDEN ROAD		f	1.3 STREE	T ADDRESS			
CITY - ST - ZIP	apopka fl			1.4 CITY-5	ST-ZIP			- 1
TITLE	P		DELETE	2.1 TITLE			Change	Addition
NAME	TETU, JANINE R			2.2 NAME				
STREET ADDRESS	1551 FOXDEN ROAD		ļ	2.3 STREE	ADDRESS	· -		}
C!TY-ST-ZIP	APOPKA FL			2. 4 CITY-	ST-ZIP			
TITLE		Ĺ	DELETE	3.1 TITLE			Change	Addition
NAME				3.2 NAME		-		
STREET ADDRESS				3,3 STREE	ADORESS			j
CITY-ST-ZIP	<u> </u>			3.4. CITY-	ST-ZIP			
TITLE		L	DELETE	4.1 TITLE			Change	☐ Addition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREE	T ADDRESS			
CITY - ST - ZIP				4.4 CITY - S	ST-ZIP			
TITLE		L	_ DELETË	5.1 TITLE			Change	Addition
NAME				5.2 NAME				İ
STREET ADDRESS				5.3 STREET	ADDRESS			1
CITY - ST - ZIP				5.4 CITY - S	ST-ZIP			
TITLE		Ľ	DELETE	6.1 TITLE			Change	Addition
NAME			ľ	6.2 NAME				-
STREET ADDRESS			ļ	6.3 STREET	ADDRESS			
CITY-ST-ZIP				6.4 CITY-S	ST-ZIP			

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

889-0987