**PROFIT** CORPORATION ANNUAL REPORT 1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P9200002145

1. Corporation Name

FINE TAI FLORIDA DEVELOPMENT, CORP.

Principal Place of Business Mailing Address					L 3001/001 tin 1010 1101 0011 0011 0011 0011 0011 00
5100 HOWELL BRANCH RD. WINTER PARK FL 32792		6906 ASH STREET VANCOUVER BC V6P3K CA			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed 11/04/1992
2. Principal Place of Business 2a. Mailing Address					4. FEI Number Applied For
21		26			59-3170979 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			_ \$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State	e <sup>:</sup>	City & State		-	6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Countr		8. This corporation owes the current year Intangible
24	25	29 30	0		Personal Property Tax.
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Registered Agent
SIU.	RACHEL				
5100 HOWELL BRANCH RD.			82	82 Street Address (P.O. Box Number is Not Acceptable)	
WINTER PARK FL 32792			83		
			84	City	85 Zip Code
			41	<u> </u>	FL V
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 reinstating)  DATE					DATE
		13.	n signature :	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	WANG, FU-CHANG		1.2 NAME		}
STREET ADDRESS	6908 ASH STREET		1.3 STREE	T ADDRESS	ss l
CITY-ST-ZIP	VANCOUVER BC V6P3K		1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	LO, VICTOR		2.2 NAME		
STREET ADDRESS	6908 ASH STREET		2.3 STREE	TADDRESS	ss
CITY-ST-ZIP	VANCOUVER BC V6P3K		2.4 CITY-5	ST-ZIP	
TITLE		DELETE	3.1 TITLE	=	Change Addition
NAME	z.		3.2 NAME		
STREET ADDRESS			3.3 STREE	TADDRESS	ss
CITY-ST-ZIP			3.4. CITY-5	T-ZiP	Chara D Addition
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS				TADORESS	SS
CITY-ST-ZIP		☐ DELETE	4.4 CITY+S	T-ZIP	☐ Change ☐ Addition
TITLE			5.1 TITLE 5.2 NAME		□ cuange □ t vocusor
NAME				T ADDRESS	252
STREET ADDRESS			5.4 CITY-S		
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition

14. I 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

REQUIRED SIGNING OFFICER OR DIRECTOR

**FILED** 

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90269 012 \*\*\*150.00