FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



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

1996

P92000004970 (9) **DOCUMENT #**

ZHENI	DA INTERNATIONAL INC	. (U.S.A.)		 	
Principal Place	of Business	Mailing Address			
7181 N. WATERWAY DR. 7181 N. WATER MIAMI FL 33155 MIAMI FL 3315			1 DR.		
				3. Date Incorporated or Qualifie	d 3a. Date of Last Report
				11/11/1992	03/20/1995
2. Principa! Fla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0371481	Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stare		City & State		6. Election Campaign Financing	□ \$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip [₩]	Gountry	Zip	Country	8. This corporation has liability for	or intangible tax under s. 199.032,
24	25 9. Name and Address of Cu	[29]	30		es 🗹 No
	g. Haine and Address of Cu	rrem Registered Agent	81 Name	10. Name and Address of New	Registered Agent
01140 7	he harry		81 Name		
SHAO-ZHI, MEL 82 Str			82 Street Add	dress (P.O. Box Number is Not Accept	able)
13905 SW 90 AVE. #E210				-	
MIAMI FI	L 33156		83		
-			84 City		■■ 85 Zip Code
aaren			'		
or¶egistere	o the provisions of Sections 607,0 ad agent, or both, in the State of F	502 and 607.1508, Florida Stati Iorida, Such change was author	ites, the above-named corporation's bo	oration submits this statement for the p	ourpose of changing its registered office oppointment as registered agent. I am
familiar w.tl	i, and accept the obligations of, S	Section 607.0505, Florida Statute	es.	are or directors. Thereby accept the ap	ppointment as registered agent. I am
SIGNATURE					
	Or sore, types or printed name of registered a		NOTE. Ragislered Agent's gnature requi		DATE
_ 12 . 		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
i	PD	☐ DELETE	1. 1 TIFLE		☐ Change ☐ Addition
NAMt	SHAO-ZHI, MEL		1.2 NAME		
STHEET ADDRESS	13905 SW 90 AVE. E210		1.3 STREET ADDRESS		
CiTY-S1 ZiP	MIAMI FL 33156		1.4 CITY-ST ZIP		
TITLE		☐ DELETE	2 1 TITLE		☐ Change ☐ Addition
NAME:			22 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CHY-ST ZIP			2 4 CITY-ST-ZIP		
TINE		☐ DEFE1F	3 1 TITLE	7000017	4 - Addition
NAME			3 2 NAME	-03/14/9601	077009
STREET ADDRESS			3.3. STREET ADDRESS	7000017 -03/14/9601 ***200.00	
0/1Y-51-7/P			34 CITY - ST - ZIP		
TILLE		☐ DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STEEL LADURESS			4.3 STREET ADDRESS		
CITY - S1 - ZIP			4.4 CITY - ST- 2IP		1
TITLE	***************************************	☐ DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		C overige C vigoribil
STREET ADDRESS			5 3 STREET ADDRESS		İ
CITY ST ZIF					f
TIFLE		DELETE	5 4 C(TY+ST-Z)P 6 1 T(TLE		
NAME		L. Vetert			Change [Addition
STHEET ADDRESS			6.2 NAME		
			63 STREET ADORESS		
14. I do hereby	certify that the information supplie	a with this fling is valuntarily for	6 4 CITY-ST-ZIP	for the even ation at the Committee at t	

certify that the information indicated on this annual report or supplies with this further certify 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: SHAD TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECT