

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

**CORPORATION
ANNUAL REPORT
1995**



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

FILED
SECRETARY OF
DIVISION OF CORP.

95 JUN 15 1

DOCUMENT # P93000000031 (3)

1. Corporation Name

FIRSTEX INVESTMENT CORPORATION

Principal Place of Business

**4836 SAFFRON DR. SOUTH
JACKSONVILLE FL 32257**

Mailing Address

**4836 SAFFRON DR. SOUTH
JACKSONVILLE FL 32257**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

01/04/1993

3a. Date of Last Report

07/26/1994

2. Principal Place of Business

21 4889 JAYBIRD CIRCLE N.

2a. Mailing Address

26 4889 JAYBIRD CIRCLE N.

Suite, Apt. #, etc

Suite, Apt. #, etc

22

27

City & State

23 Jacksonville, FL

City & State

28 JACKSONVILLE, FL

Zip

24 32257

Country

25 USA

Zip

29 32257

Country

30 USA

4. FEI Number

59-3157019

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**YEH, CHWEI-SHENG
4836 SAFFRON DR. SOUTH
JACKSONVILLE FL 32257**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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)

(Signature, typed or printed name of new registered agent, and title, if applicable)

DATE

12. OFFICERS AND DIRECTORS

**TITLE P
NAME CHWEI-SHENG, YEH
STREET ADDRESS 4889 JAYBIRD CIRCLE, NORTH
CITY, ST, ZIP JACKSONVILLE FL**

**TITLE VPT
NAME DAR-GUAM, CHENG
STREET ADDRESS 4836 SAFFRON DRIVE
CITY, ST, ZIP JACKSONVILLE FL**

**TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP**

**TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP**

**TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP**

**TITLE
NAME
STREET ADDRESS
CITY, ST, ZIP**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY, ST, ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY, ST, ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY, ST, ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY, ST, ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY, ST, ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY, ST, ZIP

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(b), 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:

Yeh Chwei-Sheng
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/1/95
Date

262-7816
Telephone Number