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

Mailing Address 8001 BISCAYNE BLVD.

MIAMI FL 33138-4620

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

8001 BISCAYNE BLVD. Miami Fl 33138

CITY - ST - ZIP

appears in Block 12 or Block



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

Apr 21 1997 8:00am

Secretary of State

3a. Date of Last Report

3. Date incorporated or Qualified

DOCUMENT # P9300000159 (2)

TAO REALTY INVESTMENTS CORP.

12/28/1992 04/26/1996 Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0375613 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 **Trust Fund Contribution** Added to Fees Country Zip Country Zip This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 TAO, QUOC KY 8001 BISCAYNE BLVD. Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33138** 83 City 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 fille if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS (96/6) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition 1.1 TITLE THEF TAO, QUOC KY 1.2 NAME NAME **CR2E034** 15740 NE 4 AVE STREET ADDRESS 13 STREET ADDRESS MIAMI BEACH FL 33162 CHY-ST-ZP 1.4 CITY - ST - ZIP DELETE Change Addition 21 TITLE TITLE NAME 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS 2. 4 CITY-ST-ZIP CITY - ST - ZIP DELETE 3.1 TITLE ☐ Change Addition TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Channe Addition TOLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIF 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 52 NAME STREET ADDRESS **5.3 STREET ADDRESS** DITY-ST-ZIP 5.4 CITY-ST-2(P DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS**

64 CITY - ST - ZIP

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 if 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

14. I do 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

ent with an address.