19	ANNUAL REPORT Secretary of State 1996 Division of Corporations					· }			
DOCUME 1. Corporation Nar	NT # P930	000	02007	(1)					
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14655 LONE E ORLANDO FL			14655 LONE EA ORLANDO FL 3			3. Date Incorporated or Qualifie	ed 3a. Date of	Last Rem	ırt
						3. Date incorporated or Outside 01/11/1993		4/18/199	5
2. Throught the control			Maining Address			4, FEI Number 59-3158109			olied For t Applicable
21		26	Suite, Apt. #, etc	C.		5. Certificate of Status Desired		\$8.75 A	dditional
Suite, Apt. #, ei	.c	27]						Fee Rec	
City & State			City & State			Election Campaign Financing Trust Fund Contribution	9 🗆	\$5.00 to Added to	
23 Ζ _Ι ρ	Country	28		Co	untry	8. This corporation has liability	for intangible tax	unders 19	99.032,
24	25	29	·	30	T	Florida Statutes 10. Name and Address of Ne	Yes No	gent	
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, INT 60%	na meei					Address (P.O. Box Number is Not Acce	otable)	,	
: Liu, Shiow-Meei 14855 Lone Eagle Dr									
	O FL 32837				83			, - ,	
Ţ. W W W					84 City		FL	85 Zip (Code
	and a single of Captions EO7 Of	502 and 0	07 1508. Floreda 9	Statutes, the at	oove named o	progration submits this statement for the board of directors. Thereby accept the		nging its reg	istered office
11. Pursuant to t or registered	ne provisions or Sections 607.0s agent, or both, in the State of F and accept the obligations of S	Jorda Sud Jector 607	th change was au 7,0505, Florida St	ithorized by the atules.	e corporation's	reporation submits this statement for the board of directors. Thereby accept the	appointment as r	egistered a	igent rain
CICASTURE							DAT:		
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6.3 STREET ADDRESS

4-12-96 407-240-7988

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). 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 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.

Meer Lew
PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

PROFIT

CORPORATION

STREET ADDRESS

SIGNATURE: