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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000021242 1. Corporation Name

EUCHEN CORP.

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90226 034 ***158.75

Principal Place of Business		Mailing Address					
7700 BISCAYNE BLVD. MIAMI FL 33138		7700 BISCAYNE BLVD. Miami FL 33138					
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed	
						03/16/1993	
2. Principal P	face of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26				65-0403994 Not Applicat	le
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required	
22		27					\dashv
City & State		City & State				6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees	
Zip Country		Zip Country			8. This corporation owes the current year Intangible	_	
·	25	29	30			Personal Property Tax.	
24	9. Name and Address of Curre					10. Name and Address of New Registered Agent	
				81	Name		
CHE	N, CHIA-PAO		-	82	Stroot Ad	Idress (P.O. Box Number is Not Acceptable)	-
770	O BISCAYNE BLVD.			02	Stieet Au	diess (F.O. Dox Humber is Not Acceptable)	
MIAMI FL 33138			Ī	83			
			}	84	City	85 Zip Code	-
					•	FL `	
office or r	registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change was a ations of, Section 607.0505, Flo	uthorized rida Statu	by t	the corpora	reporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	
12.	Signature, typed or printed name of registered agent and title if applicable. (NOTE: Re OFFICERS AND DIRECTORS			Agent	signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	- 8
TITLE	PD	ND DIRECTORS 13.		LE		CHEW, CHIA-PAO AChange Addi	tion
NAME	YU, JIUNN-HORNG	V	1.2 NA/			PRZSIDZYT/DIRZCTOR 8825 N.E. 10TH AVE.	2
STREET ADDRESS	AAAT NEE AATTA ANTENNEE		1.3 STRE		ADDRESS	DOOTALE LOTH AIR.	
CITY-ST-ZIP	MIAMI FL 33138		1.4 CITY-		-ZiP	Way T1 33138	} {
TITLE	SD	DELETE	2.1 TIT	LE		HAMI, FI 33/38 Change Addi	tion C
NAME	CHEN, CHIA-PAO	,	2.2 NAME		CH.	W MACTELL	
STREET ADDRESS	8825 NE 10TH AVENUE		23 STREE		ADDRESS	MINTSU TE AVE.	-
CITY-ST-ZIP	MIAMI FL 33138		2. 4 Cl	_	T- ZIP	WORTH MIAMI FC 25100	
TITLE	VPD	☐ DELETE	3.1 TIT			Change Addi	non
NAME	CHEN, CHIA-HSIN						
STREET ADDRESS	10110 IIII /III /III				ADDRESS		İ
CITY-ST-ZIP	NORTH MIAMI FL			TY-51	T- ZIP	☐ Change ☐ Addi	ition
TITLE	TD	☐ DELETÉ	4,1 TIT			· Orango Direct	
NAME	CHEN, CHIUNG-CHU		4.2 N		LODDEOD		
STREET ADDRESS	1				ADDRESS		
CITY-ST-ZIP	MIAMI FL 33138	☐ DELETE	4.4 CIT 5.1 TIT		1-ZIP	☐ Change ☐ Addi	ition
TITLE		_ 022212	5.1 THE				İ
NAME expect ADDRESS					ADDRESS	,	
STREET ADDRESS CITY-ST-ZIP			5.4 CIT			•	
TITLE				TITLE		☐ Change ☐ Add	ition
NAME			6.2 NA	ME			
STREET ADDRESS			6.3 ST	REET	ADDRESS		
CITY OT 710			6.4 CIT	ry-st	r-zie		

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.

SIGNATURE: