

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

CORPORATION
ANNUAL REPORT
1995



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

FILED

95 JAN 25 PM 1:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000024849 (0)

1. Corporation Name

CL & TP, INC.

Principal Place of Business

3312 NORTHSIDE DR
SUITE 415
KEY WEST FL 33040

Mailing Address

3312 NORTHSIDE DR
SUITE 415
KEY WEST FL 33040

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

04/05/1993

3a. Date of Last Report

04/18/1994

2. Principal Place of Business

21 CHENG GARDEN

2a. Mailing Address

25 CHENG GARDEN

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 101443 OVERSEAS HWY

27 101443 OVERSEAS HWY

City & State

City & State

23 KEY LARGO - FL

28 KEY LARGO - FL

Zip

Country

Zip

Country

24 33037

25

29 33037

30

5. Certificate of Status Desired

☐

\$0.75 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

10. Name and Address of New Registered Agent

LAM, CHENG
1500 OCEAN BAY DRIVE
UNIT 203 KAWAMA TOWER
KEY LARGO FL 33037

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.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PCD
NAME ZHENG, JIAN T
STREET ADDRESS 1500 OCEAN BAY DR, #203
CITY - ST - ZIP KEY LARGO FL

TITLE SD
NAME HEUNG, SHING P
STREET ADDRESS 128 LORELANE PL
CITY - ST - ZIP KEY LARGO FL

TITLE TD
NAME CHENG, FAN
STREET ADDRESS 150 OCEAN BAY DR, #204
CITY - ST - ZIP KEY LARGO FL

TITLE D
NAME CHENG, FAN
STREET ADDRESS 1500 OCEAN BAY DR, #203
CITY - ST - ZIP KEY LARGO FL

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 do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes, 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 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 if appears in Block 12 or Block 13 if changed, or on an attachment with an addendum.

SIGNATURE:

HEUNG SHING PONG
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-18-95 3:55-453-0600
Date Daytime Phone