1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P93000027451

CHIEF ENTERPRISES, INC.

Prin	cipal	Pla	ce c	of Bi	usines	\$
275	WILL	.OWI	3RO	OK	DRIVE	

Mailing Address

FILED Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90007 022 ***158.75



2275 WILLOWBROOK DRIVE CLEARWATER FL 34624		CLEARWATER FL 34624				DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed				
	•					04/12/1993				
2. Principal Place of Business 2a, Mailing Address			, Mailing Address			4. FEI Number Applied For				
- 1 '			26			. 59-3184837 Not Applicable				
21 26 26 27 28 29 26 27 28 29 29 29 29 29 29 29 29 29 29 29 29 29			Suite, Apt. #, etc.			5. Certifcate of Status Desired \$8.75 Additional Fee Required				
City & State		28	City & State			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip 24	Country 25	29	Zip Cour			8. This corporation owes the current year Intangible Personal Property Tax.				
24	9. Name and Address of Current		<u></u>	<u>'</u>		10. Name and Address of New Registered Agent				
				81	Name					
CHIN FENG HO					82 Street Address (P.O. Box Number is Not Acceptable)					
2275 WILLOWBROOK DR					OL CHECK Address (1.0. Box Humsel & Herristans)					
CLE	ARWATER FL 34624			83						
				84	City	85 Zip Code				
				04	City	FL s z p coo				
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	t FIOR	ida. Such change was auth	onzea ov	ine corbor	corporation submits this statement for the purpose of changing its registered tration's board of directors. I hereby accept the appointment as registered				
SIGNATURE	Chile- Fea Ho		HIN-FENG HO	/ VIC	S PRES	11 3/23/99				
GIGITATIONE	Signature, typed or printed name of registered agent				nt signature req	equired when reinstating) DATE DATE				
12.	OFFICERS AND	D DIR		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	D			1.1 TITLE		. Clarige				
- NAME	WEI, YOUCHING			1.2 NAME						
STREET ADDRESS 2275 WILLOWBROOK DRIVE			1.3 STREE	TADDRESS	ESS					
CITY-\$T-ZIP	CLEARWATER FL 34624-6744		1:4 CITY-5	T-ZIP						
TITLE	V	☐ DELETE 2.11		2.1 TITLE		☐ Change ☐ Addition				
NAME	HO, CHIN-FENG			2.2 NAME						
STREET ADDRESS	2275 WILLOWBROOK DR			2.3 STREE	T ADDRESS					

5.2 NAME NAME 5.3 STREET ADORESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition □ DELETE 6.1 TITLE ☐ Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

2 4 CHY ST ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

3.1 TITLE

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TTILE

□ DELETE

☐ DELETE

☐ DELETE

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:

CLEARWATER FL

CHY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

☐ Change

☐ Change

Change

☐ Addition

Addition

☐ Addition