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

PROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000045657 (2) DOCUMENT #

HARVEST, INC.

FILED May 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 30751 SW 212 AVE P O BOX 902080 MIAM! FL 33131 HOMESTEAD FL 33090 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/29/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 65-0420564 26 21 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 26 29 30 Yes Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent HAN, BAUKUO 17030 S.W. 145 COURT 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33177** 83 84 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 profed name of registered agent and little if applicable (NOTE Registered Agent signature required when rainstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change TSAI, JUNG H 1.2 NAME 17030 S.W. 145 COURT 1.3 STREET ADDRESS

12. TITLE NAME STREET ADDRESS MIAM! FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition 21 TITLE TITLE. HAN, CHING C 22 NAME NAME 17030 S.W. 145 COURT 2.3 STREET ADDRESS STREET ADORESS MIAMI FL CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE HAN, CHING J 3.2 NAME 17030 S.W. 145 COURT 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY - ST - ZIP 3.4. CITY-ST-2IP DELETE 4.1 TITLE Channe Addition HAN, BAUKUO NAME 4.2 NAME 17030 S.W. 145 COURT 4.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZWP 4.4 CITY-ST-ZIP DELETE 5.1 TITLE Addition TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADORESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ■ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **63 STREET ADDRESS** 64 CITY-ST-ZIP

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 officer or director of the corporation or the receiver or trustee empower Block 12 or Block 13 if changed, or on an attachment with an address