

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

**APPROVED  
AND  
FILED**

**95 MAY -1 PM 3:20**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

<p><b>CORPORATION ANNUAL REPORT 1995</b></p>		<p>FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS</p>
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<p>Corporation Name <b>A-1 INTERNATIONAL INC.</b></p>	<p><b>DOCUMENT # P93000048426 (9)</b></p>
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<p>Mailing Address <b>102 MICHIGAN BLVD DUNEDIN FL 34690</b></p>	<p>Principal Place of Business <b>102 MICHIGAN BLVD DUNEDIN FL 34690</b></p>
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*If above addresses are incorrect in any way, line through incorrect information and enter correction below.*

DO NOT WRITE IN THIS SPACE

<p>3. Date Incorporated or Qualified <b>07/01/1993</b></p>	<p>3a. Date of Last Report</p>
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<p>2. Mailing Address <b>21 701 Countryside Lane</b></p>	<p>2a. Principal Place of Business <b>26 701 Countryside Lane</b></p>	<p>4. FEI Number <b>59-3195649</b></p>	<p>Applied For Not Applicable</p>
<p>22. Suite, Apt. #, etc.</p>	<p>27. Suite, Apt. #, etc.</p>	<p>5. Certificate of Status Desired <b>\$0.75 Annual Fee (by law)</b></p>	<p>6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/></p>
<p>23. City &amp; State <b>23 Palm Harbor, Florida</b></p>	<p>28. City &amp; State <b>28 Palm Harbor</b></p>	<p>7. Nonprofit Exempt from \$138.75 Supplemental Fee <input type="checkbox"/></p>	<p><b>\$5.00 May Be Added to Fees</b></p>
<p>24. Zip <b>24 34683</b></p>	<p>25. County</p>	<p>29. Zip <b>29 34683</b></p>	<p>30. County</p>

<p>8. Name and Address of Current Registered Agent <b>MIZIO ARMANDO F 102 MICHIGAN BLVD DUNEDIN FL 34690</b></p>	<p>10. Name and Address of New Registered Agent</p>
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81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	<b>FL</b>
85. Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 607.0503 or 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
*(Registered Agent Accepting Appointment) (Not Registered Agent signature required when reinstating)*

12. OFFICERS AND DIRECTORS		13. CHANGES TO OFFICERS AND DIRECTORS IN 12	
11 TITLE	<b>D/P</b>	11 TITLE	
12 NAME	<b>YUEN LONG KAU</b>	12 NAME	
13 STREET ADDRESS	<b>701 COUNTRYSHIRE LN</b>	13 STREET ADDRESS	<b>Palm Harbor, Florida 34683</b>
14 CITY - ST - ZIP	<b>CLEARWATER FL 34683 PALM HARBOR FL 34683</b>	14 CITY - ST - ZIP	
21 TITLE		21 TITLE	
22 NAME		22 NAME	
23 STREET ADDRESS		23 STREET ADDRESS	
24 CITY - ST - ZIP		24 CITY - ST - ZIP	
31 TITLE		31 TITLE	
32 NAME		32 NAME	
33 STREET ADDRESS		33 STREET ADDRESS	<b>700001518227</b>
34 CITY - ST - ZIP		34 CITY - ST - ZIP	<b>-06/20/95--01112--023</b>
41 TITLE		41 TITLE	<b>****200.00 ****200.00</b>
42 NAME		42 NAME	
43 STREET ADDRESS		43 STREET ADDRESS	
44 CITY - ST - ZIP		44 CITY - ST - ZIP	
51 TITLE		51 TITLE	
52 NAME		52 NAME	
53 STREET ADDRESS		53 STREET ADDRESS	
54 CITY - ST - ZIP		54 CITY - ST - ZIP	
61 TITLE		61 TITLE	
62 NAME		62 NAME	
63 STREET ADDRESS		63 STREET ADDRESS	
64 CITY - ST - ZIP		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)(b), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(b) in the event that the information supplied is deemed exempt from public access. I further certify that the information reflected on this annual report or supplemental annual report in this and accurate and that my signature shall have the same legal effect as if made under oath; that I have fulfilled all obligations concerning my duties properly imposed by Chapter 717, Florida Statutes; 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Long Kau Yuen President 5/01/95 (813) 789-9547  
SIGNATURE AND TYPE OR PRINT NAME OF REGISTERED OFFICER OR DIRECTOR Daytime Phone #