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

Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90026 014 ***150.00

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GOLDEN	i Hong Kong, Inc.														
Principal Plac	e of Business	Ma	ailing Add	ress										181 66 11 1641	
1429 S.W. 107T		142	29 S.W. 10	7TH AVE.											
MIAMI FL 33174			MIAMI FL 33174												
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a Principal D	lace of Business	20	Mailing /	Address					4. FEI Number			TT	Appli	ed For	
21			26						l				Applicable		
Suite, Apt.	#, etc.	20	Suite, A	ot. #, etc.								\$8.75	Ad	ditional	
22			27						5. Certificate of Status Desired Fee Required					ired	<u>.</u>
City & State			City & State						6. Election Car	mpaign Financing	; _□	\$5.0	0 м	ay Be	_
23		28							Trust Fund	Contribution		Adde	d to	Fees	
Zip	Country		Zip		Cou	ntry				ation owes the cu	ırrent year In		_	.	
24	25	29			30				Personal Pr		Dlatamad]No	
	9. Name and Address of Currer	nt Regis	tered Ag	ent		81	Name		10. Name and	Address of New	Kegistered	Agent			
CHE	NG HENRY F					J.	Name		_	.Sh.					
CHENG, HENRY F 1429 S.W. 107TH AVENUE						82	Street	Addres	ss (P.O. Box Nun	nber is Not Accep	otable)				
	/II FL 33174					83									
14114 11															
				~		84	City				FL	85 Zi	ip Co	de }	
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florid	ia. Such d	change was a	utnorized	l by i	the corpo	corpor pration	ration submits this 's board of direct	s statement for thors. I hereby acc	e numose o	f changing	its re regis	gistered stered	
SIGNATURE											DATE				
40	Signature, typed or printed name of registered age OFFICERS AI			(NOTE	Registered	Agen	t signature r	equirea w	when reinstating)	CHANGES TO C		ND DIREC	TOR	S IN 12	
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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 Block 12 or Block 13 if changed, or on an affachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP