FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

APPROVED AND FILED
95 MAY -1 PM 8:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000056035 (7)

1. Corporation Name
TMC CHINA, CORPORATION

Principal Place of Business
2124 N.E. 123 ST.
SUITE 41
MIAMI FL 33181

Mailing Address
2124 N.E. 123 ST.
SUITE 41
MIAMI FL 33181

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/10/1993	3a. Date of Last Report: 06/28/1994
4. FEI Number: 65-0437144	Applied For / Not Applicable
5. Certificate of Status Desired ☐	$8.75 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	

2. Principal Place of Business	2a. Mailing Address
21 1200 NE MIAMI GARDENS DR	26 19000 NE 20 COURT
Suite, Apt. #, etc. 22 APT # 901	Suite, Apt. #, etc. 27
City & State 23 NORTH MIAMI BEACH, FL	City & State 28 NORTH MIAMI BEACH, FL
Zip 24 33179 County 25	Zip 29 33179 Country 30

9. Name and Address of Current Registered Agent

LEOPOLD, NORMAN
20801 BISCAYNE BLVD
SUITE 501
NORTH MIAMI BEACH FL 33180

10. Name and Address of New Registered Agent

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 ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1 TITLE	D ☑ Change ☐ Addition
NAME	GOLDRING, MAURICIO	1 NAME	GOLDRING, MAURICIO
STREET ADDRESS	210 174TH ST SUITE 1419	1 STREET ADDRESS	3683 NE 199 St
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33160	1 CITY-ST-ZIP	AVENTURA, FL 33180
TITLE	D	2 TITLE	D ☑ Change ☐ Addition
NAME	SHALEV, LIOR	2 NAME	SHALEV, LIOR
STREET ADDRESS	19000 NE 20TH CT	2 STREET ADDRESS	19000 NE 20th CT
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33180	2 CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179
TITLE	D	3 TITLE	D ☑ Change ☐ Addition
NAME	CHEN, HSINPO	3 NAME	CHEN, HSINPO
STREET ADDRESS	1200 MIAMI GARDENS DR #901 WEST	3 STREET ADDRESS	1200 N.E. MIAMI GARDENS DR, APT 901
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33179	3 CITY-ST-ZIP	NORTH MIAMI BEACH, FL 33179
TITLE		4 TITLE	☐ Change ☐ Addition
NAME		4 NAME	
STREET ADDRESS		4 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		5 TITLE	☐ Change ☐ Addition
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE		6 TITLE	☐ Change ☐ Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 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)(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.

SIGNATURE: LIOR SHALEV, DIRECTOR 4/24/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0100221 CP