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

CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

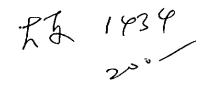
DOCUMENT #

P93000064490 (4)

GOLDEN HORSE CULTURE BUSINESS DEVELOP (U.S.), IN

Principal Place of Business

Mailing Address





2898 UNIVERSITY DRIVE UNIT 43 CORAL SPRINGS FL 33065			502 NW 87 LANE CORAL SPRINGS FL 33071						
						3. Date Incorporated of 09/15/1993	Qualified	3a. Date of Last 10/09/	
2. Principal Pla	ice of Business	2a. Mailing /	. Mailing Adoress			4. FEI Number	L	10,00,	Applied For
21		26	6			CF 0400007			Not Applicable
Suite, Apt. #		Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status Desired			
City & State		City & St	ate			6. Election Campaign F	inancing	\$5.0	00 May Be
23		26				Trust Fund Contribut	ion L	, , ,	ed to Fees
Zip	├ ¬ '	Country Zip Cou			•	8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29 30 9. Name and Address of Current Registered Agent					Florida Statutes Yes [] No			
	9. Name and Address of Curi	ent Registered Ag	ent	81	Alassa	10. Name and Address	of New Reg	Istered Agent	
301 115				181	Name				
XU, JIN G				82	Street Add	iress (P.O. Box Number is No	t Acceptable)		
331 NE 18 ST									
UNIT 2		83							
MIAMI FL 33132				84	City			—. 85 Z	up Code
					1			3 -1 1	
or registere familiar with	o the provisions of Sections 607.05 ad agent, or both, in the State of Fig. , and accept the obligations of, Se	02 and 607.1508, Fl orida. Such change v ection 607.0505, Flor	orida Sitatutes, the a vas authorized by th ida Statutes.	above-r	named corpo oration's boa	oration submits this statement and of directors. I hereby acce	for the purpose pt the appoint	se of changing its ment as registere	registered office d agent. I am
SIGNATURE _									
12.	Signature typed or printed name of registered ag	ont and title if applicable			it signature re juin	ed when reinstating;	0.70.000.00	DATE	
TITLE	PD			3.		ADDITIONS/CHANGE	S TO OFFICE		
NAME	FENG. DI	ليا	3	1 TITLE	-			☐ Change	Addition
1		100 400		2 NAME					
STREET ADDRESS	6/F CHINA OVERSEAS B				ADDRESS				
CITY-ST-ZIP	HENESSY RD,HONG KOI			4 CITY - S	T-ZIP	·····			
TITLE	VD	L		1 TITLE				Change	Addition
NAME	CHU, YONG K		2	2 NAME					
STREET ADDRESS 6/F CHINA OVERSEAS BLDG 139				2.3 STREET ADDRESS					
CiTY-ST-ZIP	HENESSY RD,HONG KO			4 CITY - S	T - ZIP				
TITLE	TD		DELETE 3	1 TITLE				☐ Change	Addition
NAM!	CHEN, YAN Y		3.3	2 NAME					
STREET ADDRESS	6/F CHINA OVERSEAS BI		3:	3 STREET	ADDRESS	~~~~			
CITY - ST - ZIP	HENESSY RD,HONG KON			4 CITY-S	T-ZIP	\$10000 -04/25/96 ***200.00	1794	4658	
TITLE	SD		DELETE 4	1 TITLE	Ţ .	-04725/98	501063		Addition
NAME	Xu, Jin G		4:	2 NAME		***200.00	ļ		
STREET ADDRESS	1846 NE 4 AVE		4.3	3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL 33132		4.0	4 DITY-S	r-ZiP				ļ
TITLE			DELE1E 5.	1 TITLE				Change	Addition
NAME			5.3	2 NAME				_ ·	
STREET ADDRESS			5.3	3 STREET	ADDRESS				
CHY-SI-ZIF				4 CITY - S					
THILE				1 TITLE				☐ Change	Addition
NAME .				2 NAME				Lad 5 angs	
STREET ADDRESS				STREET	ADORESS				
CITY-ST-ZIP				4 CITY-SI					
	certify that the information europine	Audith this files is vol		1 UII 1 - 3	707]	for the automates at the discount	2 110 570		

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)(k), 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 circector 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, of on an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAJ