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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P93000068152 (6) FIRST HONG KONG CITY, INC.									
Principal Place of Business Mailing Address						s southant tim twing teles dout water		21161 16161 11 68	· = (114 1141 144)
5301 N STATE ROAD 7 5301 N STATE ROAD 7 TAMARAC FL 33319									
						 Date tricorporated or Qualified 09/30/1993 		ite of Last Re 05/01/1 99	
. Principal Pla	Principal Place of Business 2a. Mailing Address					4. FEI Number	. 1		Applied For
26						65-0440743 Not Applicable			
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired		*	Additional Required
City & State		City & State				6. Election Campaign Financing			O May Be
City & State	,	28				Trust Fund Contribution		Adde	d to Fees
Zip	Country	Zip	Cour	itry		8. This corporation has liability for		tax under s	199.032,
	25	29	30			Florida Statutes X Yes 10. Name and Address of New I	No.	d Agent	
	9. Name and Address of Curre	nt Hegistereo Agent		81	Name	10. Name Bilo Address of New I	icgistero	o Ago	
KWOK, YING KIT						dress (P.O. Box Number is Not Accepta	:Jo)		
5301 N. STATE ROAD 7				82	Street Add	gress (P.O. Bax number is not Accepted	ле,		
	IC FL 33319			83					
					City		F	. 85 Zu	p Code
	Signature, typed or printed name of registered agor	st and title if applicable. (N	IOTE Registered :			and of directors. I hereby accept the application is considered. ADDITIONS/CHANGES TO OFF	DATE		
2.	OFFICERS AN	ID DIRECTORS	13. 1. 1 Til	TI E		ADDITIONS/CHANGES TO OF	IUE.NS AI	Change	
TLE Ame	KWOK, YING KIT	L] Detter	1.2 NA						
reet address	5301 N STATE ROAD 7				ADORESS				
TY-ST-ZIP	TAMARAC FL 33319		1.4 011	Y-8	T-ZIP				
LE	V □ DELETE		2 1 Ti	TLE				Change	☐ Addition
IM E	KWOK, POLIN		2 2 NA						
REET ADDRESS	5301 N STATE ROAD 7				ADDRESS				
Y-ST-ZIP LE	TAMARAC FL 33319			24 CITY - ST - ZiP 3 1 TITLE				Change	Addition
LE ME	-		3 2 NA						
REF1 ADDRESS			3.3 \$1	REE	ADDRESS				
Y - ST - ZIP			3 4 CI		1 - ZIF			D Chann	Madition
LE		☐ DELETE	4.171					☐ Change	☐ Addition
ME			4.2 NA		ADDRESS				
REET ADORESS			4.3 ST 4.4 OF		ADDRESS				
TY-ST-ZIP TLE		☐ DELETE	5 1 Ju					☐ Change	Add tion
AME		***	52 NA	ME	1				
REET ADDRESS			18 6 2	HEET	ADDRESS				
TY-ST-ZIP					I - ZIP	· · · · · · · · · · · · · · · · · · ·		[] Chance	[T] Addition
7	1	E DELETE	6.171	1.6				Change	Addition

6 4 CITY - \$1 - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily turnished 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 logal effect as if made under cath; that I am an officer or director of the corporation of 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 or a graculture with an address.

6 11111.6

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE: X

TITLE

NAME

STREET ADDRESS

Ying Kit Kwok SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

□ DELETE

(954)777-3832

Dayline Pront #