FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000080223 (9)

DATA POINT ELITE INTERNATIONAL CORPORATION

FILED May 01 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 15658 118TH TRAIL NORTH 15658 118TH TRAIL NO JUPITER FL 33478 JUPITER FL 33478-6798			TH						
						3. Date incorporated or Qualified 11/19/1993		ate of Las	
	lace of Business	2a. Mailing Address				4. FEI Number	1		Applied For
21		26 Suite And # etc				65-0462990		60 7	Not Applicable
22 Suite, Apr.	Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired			5 Additional Required
City & Stat	0	City & State				6. Election Campaign Financing Trust Fund Contribution			May Be
Zφ	Country	Zip	Count	try	· · · · · · · · · · · · · · · · · · ·	6. This corporation has liability for i	ntangible	tax unde	
24	25		30		······································	<u> </u>	Yes		
	9. Name and Address of Curr			31	Name	10. Name and Address of New Re	Bisteled	Agent	
CORPORATION INFORMATION SERVICES INC. 1201 HAYS ST.			[
TALLAHASSEE FL 32301					Street Addre	ress (P.O. Box Number is Not Acceptable)			
			\[\begin{align*}	33			_		
			l i		City		FL	_	p Code
SIGNATURE	Ship-ition: hypodisi prioted name of registered a	gent and title if applicable (NOT)	E: Registered /			oration submits this statement for the pon's board of directors. I hereby accepted when reinstating)	DATE		
12. Tilli	P OFFICERS A	ND DIRECTORS DELETE	13.	<u>.</u>		ADDITIONS/CHANGES TO OFFIC	ERS AN	Chang	
NAME	KAO, GWENDOLYN B	C DECENT	1.2 NAM					Onland	C LL MUNICION
STREET ADDRESS	15858 118TH TRAIL NORTH				ADDRESS				
CITY - ST - ZIP	JUPITER FL 33478		1.4 CITY	/-ST-	- ZIP				
TITLE	ST	DELETE	2.1 TITU	.E				Chang	e 🔲 Addition
NAME	KAO, YUAN M		2.2 NAM						
STREET ADDRESS City - St - Zip	15658 118TH TRAIL NORTH JUPITER FL 33478		2.3 STRE 2.4 CIT						
THE	JUPILEN LE 30470	DELETE	3.1 TITL		- 2.18	, 		Chang	e Addition
NAME			3.2 NAM	ħĖ	1				
STHEET ADDRESS			33 STRE	EET A	IDDRESS				
CITY - S1 - 7IP			3.4. CIT		-ZIP			Chang	e Addition
TITLE		I DELETE			ı			I LEMMIC	רוטוווטרו ניייז
N: ASAF		☐ DELETE	4.1 TITL		-				
NAME STREET ADORESS		☐ DELETE	4. 2 NAM	ME	ADDRESS				
			4. 2 NAM	ME Eet a	LOORESS ZIP				
STREET ADORESS CITY-ST-2IP THEE		☐ DELETE	4. 2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE	ME Eet a /•st•	1		, <u></u>	☐ Chang	e Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME			4. 2 NAM 4.3 STRE 4.4 CITY 5.1 TITL 5.2 NAM	ME EET A (- ST - E	- ZIP				e Addition
STREET ADDRESS CITY-ST-20P THLE NAME STREET ADDRESS			4.2 NAM 4.3 STRE 4.4 CHY 5.1 TITL 5.2 NAM 5.3 STRE	ME EET A (- ST - E E (E EET A	ADDRESS				e 🔲 Addition
STREET ADDRESS CHY-SH-AP THLE NAME STREET ADDRESS CHY-SH-ZIP		☐ DELETE	4.2 NAN 4.3 STRE 4.4 CHTY 5.1 TITLI 5.2 NAM 5.3 STRE 5.4 CHTY	ME EET A (-ST- E ME EET A (-ST-	ADDRESS				
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STREET ADDRESS CHY-SE-ZIP THRE NAME STREET ADDRESS CHY-SE-ZIP THRE		☐ DELETE	4. 2 NAN 4.3 STRE 4.4 CHTY 5.1 TITU 5.2 NAM 5.3 STRE 5.4 CHTY 6.1 TITU 6.2 NAM	ME EET A (-ST- EET A (-ST- E	ADDRESS			☐ Chang	

14. I do 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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-24-94

56/- 575-5/55 Daytime Phone #

0333782