
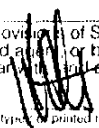
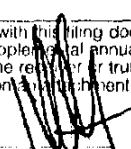


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

May 09 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P93000080636 (2) 1. Corporation Name AMERICAN SUNSHINE TECHNOLOGIES, INC.			
Principal Place of Business 1800 NW 84TH AVE MIAMI FL 33126 US		Mailing Address 1800 NW 84TH AVE MIAMI FL 33126-1032 US	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	
9. Name and Address of Current Registered Agent NI, SUNG Y 9763 N.W. 40 TERR MIAMI FL 33178		10. Name and Address of New Registered Agent 81 Name CHEN, KUANG P 82 Street Address (P.O. Box Number is Not Acceptable) 1600 NW 84 AV. 83 84 City MIAMI 85 Zip Code FL 33126	
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:  CHEN, KUANG P. DVS. DATE: 4/8/97			
12. OFFICERS AND DIRECTORS TITLE: PVD NAME: HAUANG, WEN-LIANG STREET ADDRESS: 1800 NW 84TH AVE CITY-ST-ZIP: MIAMI FL [] DELETE		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 [] Change [] Addition 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP DVS CHEN, KUANG P 1600 NW 84 AV. MIAMI, FL 33126 [] Change [] Addition 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP [] Change [] Addition 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP [] Change [] Addition 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP [] Change [] Addition 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP [] Change [] Addition	
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 registered agent 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:  DATE: 4/8/97 DAYTIME PHONE: 305 599 9676			

CR2E034 (9/96)