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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 19 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000087187 (9)

CTS INTERNATIONAL INC. USA

Principal Place of Business C/O FLORIDA SPLENDID/CHINA 3000 SPELNOID CHINA BLVD KISSIMMEE FL 34747		Mailing Address C/O ROGER D SCHWENKE P O BOX 3239 TAMPA FL 33801-3239		(1980) Let the Marke (1111) detail obtail early early obtail hely seaso (1262) John John Charles	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 3000 SPLENDID CHINA		59-3215006 Not Applicable	
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Cily & State		City & State		6. Election Campaign Financing \$5.00 May Be	
23		28 KISSIMMEE,	FL	Trust Fund Contribution	Added to Fees
Ζφ	Country	Z _i p	Country	8. This corporation has liability for Ir	ntangible tax under s. 199.032,
24	25	29 FLORIDA 3	0 USA	Florida Statutes	Yes No
	9. Name and Address of Curren	Registered Agent		10. Name and Address of New Reg	latered Agent
AT	IRLTON FIELDS WARD EMMANUE T: ROGER D SCHWENKE	l smith et al	B1 Name YANO B2 Street	Address (P.O. Box Number is Not Acceptable	9)
ONE HARBOUR PL 7TH FLOOR				<u>) SPLENDID CHINA BLV</u>	D
· TAI	MPA FL 33602		63		
			84 City		85 Zip Code
				SIMMEE	FL 34747
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	, the above-named	corporation submits this statement for the proporation's board of directors. I hereby accep	
office or	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was au	thorized by the corp	poration's board of directors. I hereby accept	t the appointment as registered
l <u>-</u>	am ramiliar with and accept the obliga	rions of, Section 607, 6065, Figh	da Siaiules.		
SIGNATURE	Signature typed or plinted name of registered ager	and the if probable	Registered Agent signature	required when reinstalies)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TOLE	PD	DELETE	1,1 TITLE	ADDITIONA OF THE OFFICE	Change Addition
NAME	ZHU, YUE-NING	hand 2 days	1.2 NAME		
	3000 SPLENDID CHINA BLVD.				
STREET ADDRESS			1.3 STREET ADDRESS		
CITY-ST-ZIP	KISSIMMEE FL 34747		1.4 CITY - ST - ZIP		To a land a series
THLE	S	₩ DELETE	2.1 TITLE	S	Change X Addition
NAME	BALL, PAO LIN		2.2 NAME	YANG, GUANG	
STREET ADDRESS	3000 SPLENDID CHINA		2.3 STREET ADDRESS	3000 SPLENDID CHINA	BLVD
City - St - Zip	KISSIMMEE FL 34747		2.4 CITY - ST - ZIP	KISSIMMEE, FL 34747	
TILE		☐ DELETE	3.1 TITLE	D	☐ Change 🙀 Addition
NAME	1		3.2 NAME	YANG, GUANG	•
STREET ADDRESS			3.3 STREET ADDRESS	3000 SPLENDID CHINA	DIVID
			3.4. CITY - ST - ZIP		
C TY - ST - ZIP		☐ DELETE	4.1 TITLE	KISSIMMEE, FL 34747	Change Addition
		E PETELE			find compty find requirem
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP		Locure	4.4 City - St - ZiP		Change Addition
THILE		DELETE	51 TITLE		
NAME			5.2 NAME	80000219	ಶಿಕ್ಕ ಗ್ಗ
STREET ADDRESS			53 STREET ADDRESS	-06/02/970100	12010
CHTY- ST-ZIP			5.4 CITY - ST - ZIP	***825 . 00	
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			62 NAME		Ρε
CIESEL ADORECS			R 2 CTREET ANADECC		T & _

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.