

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

55 MAR 28 PM 3:24

DOCUMENT # **P94000005643 (9)**

1. Corporation Name

NEW CHINA OF STUART INC.

Principal Place of Business

**6220 S.E. FEDERAL HIGHWAY
STUART FL 34997**

Mailing Address

**6220 S.E. FEDERAL HIGHWAY
STUART FL 34997**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

01/14/1994

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc

2a. Mailing Address

26 Suite, Apt. #, etc

4. FEI Number

65-0462008

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

9. Name and Address of Current Registered Agent

**LI, KOU S
6220 S.E. FEDERAL HIGHWAY
STUART FL 34997**

10. Name and Address of New Registered Agent

81 Name

Li, Kou Shun

82 Street Address (P.O. Box Number is Not Acceptable)

Same Person - Just

83

Change your Spelling

84 City

FL 85 Zip Code

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

(Signature, typed or printed name of registered agent and fee if applicable)

(NOTE: Registered Agent signature required when constituting)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **LI, KOU S HUN**
STREET ADDRESS **1966 SE CAMDEN STREET**
CITY- ST- ZIP **PORT ST. LUCIE FL 34952**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☒ Change ☐ Addition
12 NAME **Li, Kou-Shun**
13 STREET ADDRESS **(Same person) (you have it spelled incorrectly)**
14 CITY- ST- ZIP

TITLE

NAME

STREET ADDRESS

CITY- ST- ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY- ST- ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY- ST- ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY- ST- ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY- ST- ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY- ST- ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

Kou Shun Li
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/23/95 407-287-8772
DATE SIGNATURE