SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT
1995

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

FILED
1995 JUL 27 AM 10: 18
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P94000007729 (4)

1. Corporation Name
UNITED CAPITAL USA, INC.

Principal Place of Business
4303 ARLEY PLACE
VALRICO FL 33594

Mailing Address
4303 ARLEY PLACE
VALRICO FL 33594

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/01/1994
3a. Date of Last Report: N/A
4. FEI Number: 59-3221448 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc. 27 5656 SPRINGFIELD BLVD.
City & State 28 Bayside, NY
Zip 29 11364 Country 30 USA

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
LAW FIRM OF LAWRENCE J. SPIEGEL CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33114

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1 1 TITLE	P ☑ Change ☐ Addition
NAME	LANGQ, LARRY H. P	1 2 NAME	LANG, LARRY H.P.
STREET ADDRESS	% 4303 ARLEY PLACE	1 3 STREET ADDRESS	5656 SPRINGFIELD BLVD.
CITY-ST-ZIP	VALRICO FL 33594	1 4 CITY-ST-ZIP	Bayside, NY 11364
TITLE		2 1 TITLE	VP/D ☐ Change ☑ Addition
NAME		2 2 NAME	QIAN, BAO MIN
STREET ADDRESS		2 3 STREET ADDRESS	5656 SPRINGFIELD BLVD
CITY-ST-ZIP		2 4 CITY-ST-ZIP	Bayside, NY 11364
TITLE		3 1 TITLE	T/D ☐ Change ☑ Addition
NAME		3 2 NAME	OFEK, ELI
STREET ADDRESS		3 3 STREET ADDRESS	4 Washington Square Village, Suite 11E
CITY-ST-ZIP		3 4 CITY-ST-ZIP	NY, NY 10012
TITLE		4 1 TITLE	D ☐ Change ☑ Addition
NAME		4 2 NAME	CHIANG, RAYMOND
STREET ADDRESS		4 3 STREET ADDRESS	1073, Tower 17, Hong Kong Parkview
CITY-ST-ZIP		4 4 CITY-ST-ZIP	Hong Kong
TITLE		5 1 TITLE	D ☐ Change ☑ Addition
NAME		5 2 NAME	LIU, ERH FEI
STREET ADDRESS		5 3 STREET ADDRESS	1093, Tower 17, Hong Kong Parkview
CITY-ST-ZIP		5 4 CITY-ST-ZIP	Hong Kong
TITLE		6 1 TITLE	D ☐ Change ☑ Addition
NAME		6 2 NAME	YAN, ANDY
STREET ADDRESS		6 3 STREET ADDRESS	5656 SPRINGFIELD BLVD
CITY-ST-ZIP		6 4 CITY-ST-ZIP	Bayside, NY 11364

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 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] Larry H.P. LANG July 24, 95 7182794590
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (3/95)

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