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FILED

Mar 26 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 # P94000012351 (0)

1. Corporation Name
CHINA ISLAND, INC.



Principal Place of Business
6516 W. ATLANTIC BLVD.
MARGATE FL 33063

Mailing Address
6516 W. ATLANTIC BLVD.
MARGATE FL 33063-5135

3. Date Incorporated or Qualified 02/11/1994	3a. Date of Last Report 04/23/1996
4. FEI Number 65-0471160	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	

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

g. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHLUCHTER, LARRY J
7340 W. ATLANTIC BLVD.
MARGATE FL 33063

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 607.0902 and 607.1506, 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 of person who is the registered agent and files this report)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☐ DELETE

1.1 TITLE

☐ Change

☐ Addition

NAME

D
TANG, TSAN L
1051 N.W. 50TH AVE.
MARGATE FL 33068

1.2 NAME

1.3 STREET ADDRESS

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

1.4 CITY - ST - ZIP

2.1 TITLE

☐ DELETE

2.1 TITLE

☐ Change

☐ Addition

NAME

2.2 STREET ADDRESS

2.2 STREET ADDRESS

2.3 CITY - ST - ZIP

2.3 CITY - ST - ZIP

3.1 TITLE

☐ DELETE

3.1 TITLE

☐ Change

☐ Addition

NAME

3.2 STREET ADDRESS

3.2 STREET ADDRESS

3.3 CITY - ST - ZIP

3.3 CITY - ST - ZIP

4.1 TITLE

☐ DELETE

4.1 TITLE

☐ Change

☐ Addition

NAME

4.2 STREET ADDRESS

4.2 STREET ADDRESS

4.3 CITY - ST - ZIP

4.3 CITY - ST - ZIP

5.1 TITLE

☐ DELETE

5.1 TITLE

☐ Change

☐ Addition

NAME

5.2 STREET ADDRESS

5.2 STREET ADDRESS

5.3 CITY - ST - ZIP

5.3 CITY - ST - ZIP

6.1 TITLE

☐ DELETE

6.1 TITLE

☐ Change

☐ Addition

NAME

6.2 STREET ADDRESS

6.2 STREET ADDRESS

6.3 CITY - ST - ZIP

6.3 CITY - ST - ZIP

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:

Sean Kevin Savoy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-19-97 (954) 969-5177

Date

Daytime Phone

0148053

CR2E034 (9/96)