

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P94000022140 (5)

1. Corporation Name

SHANG HAI CLEARWATER, INC.



Principal Place of Business

1835 N. HIGHLAND AVE.
CLEARWATER FL 34616

Mailing Address

1835 N. HIGHLAND AVE.
CLEARWATER FL 34616

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

9. Name and Address of Current Registered Agent

CHIU, HONG CHENG
1835 N. HIGHLAND AVE.
CLEARWATER FL 34616

3. Date Incorporated or Qualified

03/22/1994

3a. Date of Last Report

02/20/1995

4. FEI Number

APPLIED FOR 59-3238756

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81

Name

KIM KEE ANG

82

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

83

1835 N. HIGHLAND AVE.

84

City

CLEARWATER

FL

85

Zip Code

34616

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 *x K. K. Ang*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE

D

☒ DELETE

NAME

CHIU, HONG CHENG

STREET ADDRESS

1835 N. HIGHLAND AVE.

CITY-ST-ZIP

CLEARWATER FL 34616

TITLE

D

☒ DELETE

NAME

CHEN, WEN-LUNG

STREET ADDRESS

9208 DAYFLOWER DRIVE

CITY-ST-ZIP

TAMPA FL 33647

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

P/D

☐ Change

☒ Addition

1.2 NAME

KIM KEE ANG

1.3 STREET ADDRESS

1835 N. HIGHLAND AVE.

1.4 CITY-ST-ZIP

CLEARWATER, FL 34616

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 119.07(3)(k), 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: *x K. K. Ang*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/96

813-4467798

Daytime Phone #

CR2E034 (12/95)