

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
Sep 19 1997 8:00am  
Secretary of State

DOCUMENT # P94000037375 (0)

1. Corporation Name  
CHEQUEPOINT SOUTH, INC.



Principal Place of Business  
UNITED CORPORATE SVCS. INC.  
801 N.E. 167TH STREET, SUITE 300  
NORTH MIAMI BEACH FL 33162

Mailing Address  
865 COLLINS AVENUE  
MIAMI BEACH FL 33139

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/18/1994		3a. Date of Last Report 06/19/1996	
21		26		4. FEI Number 13-3784667		Applied For Not Applicable	
22		27		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24		29		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

UNITED CORPORATE SERVICES INC.  
801 N.E. 167TH STREET  
SUITE 300  
NORTH MIAMI BEACH FL 33162

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	ST	1.1 TITLE	ST
NAME	BASNAYAKE, DEHAN	1.2 NAME	Mallios, Chris
STREET ADDRESS	104-80 QUEENS BLVD. #5N	1.3 STREET ADDRESS	22 Central Park South
CITY-ST-ZIP	FOREST HILLS NY 11375	1.4 CITY-ST-ZIP	NY, NY 10019
TITLE	P	2.1 TITLE	
NAME	BERMUDZ, VICTOR	2.2 NAME	
STREET ADDRESS	151103 CYPRESS RICH DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	CYPRESS TX 77429	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	D
NAME	BROWN, COLVIN	3.2 NAME	Kay, Leung Man
STREET ADDRESS	169 ELECTRIC ROAD, 7 FLOOR HONG KONG	3.3 STREET ADDRESS	169 Electric Road, 7th floor
CITY-ST-ZIP	HONG KONG	3.4 CITY-ST-ZIP	Hong Kong
TITLE	D	4.1 TITLE	
NAME	FULTON, JAMES	4.2 NAME	
STREET ADDRESS	169 ELECTRIC ROAD, 7 FLOOR HONG KONG	4.3 STREET ADDRESS	
CITY-ST-ZIP	HONG KONG	4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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  
9/16/97

CR2E034 (4/97)