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

Country

9. Name and Address of Current Registered Agent

25

| DOCUMENT # P9400054705 (6) 1. Corporation Name | | | | | | | | |
|--|---------------------------------------|--|--|--|--|--|--|--|
| PEKING DYNASTY, INC. | • | | | | | | | |
| Principal Place of Business | Mailing Address | | | | | | | |
| 113 SW 107TH AVENUE MIAMI FL 33174 | 113 SW 107TH AVENUE MIAMI FL 33174 | | | | | | | |
| Principal Place of Business | 28. Mailing Address | | | | | | | |
| Suite, Apt. #, etc. | 26 | | | | | | | |

28

29

City & State

Zip

SANG, JOSE T 113 SW 107TH AVENUE

SIGNATURE: SIGNATURE AND THE

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Ζiρ

City & State

| 1 | to Incorporated or Qualified 38 Date of Last Report | |
|---|---|--|

Yes 🛄 No

10. Name and Address of New Registered Agent

05/01/1995

for intangible tax under s 199.032,

Daytime Phone #

Applied For

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

07/22/1994

65-0511263

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

8. This corporation has liability

Florida Statutes

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

4. FEI Number

| MIAMI FL 331/4 | | | | | | | | | |
|---|--|---------------------------------|--------------------------|-----------------------|--|----------------|--|--|--|
| | | | 84 | , , | FL 85 Zip Code | | | | |
| or registers | o the provisions of Sections 607.0502 and 607.1 ad agent, or both, in the State of Florida. Such of h, and accept the obligations of, Section 607.05 | hande was auth orize d t | the above- by the com | named co oration's | orporation submits this statement for the purpose of changing its registered board of directors. I hereby accept the appointment as registered agent. I | d office am | | | |
| SIGNATURE - | Signature, typed or printext name of registerco agent and title if appl | cable (NOTE: F | Registered Ager | it signature r | required when reinstalling) DATE | | | | |
| 12. | OFFICERS AND DIRECTO | | 13. | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | | | | |
| TOTLE | P | DELETE | 1. 1 TITLE | | Change Add | dition | | | |
| NAME | SANG, CATALINO N. | | 1.2 NAME | | | | | | |
| STREET ADDRESS | 113 SW 107TH AVENUE | | 1.3 STREET | ADDRESS | | | | | |
| CITY-ST-ZIP | MIAMI FL | | 1.4 CITY - 9 | ST-ZIP | | | | | |
| TITLE | VP | DELETE | 2. 1 TITLE | | | ldition | | | |
| NAME | LUK, JAN W | | 2.2 NAME | | LUK, JAN W | | | | |
| STREET ADDRESS | 113 SW 107TH AVENUE | | 2 3 STREET | F ADDRESS | 113 SW 107TH AVE. | | | | |
| CITY-ST-ZIP | MIAMI FL | | 2.4 CITY - 3 | ST - 71P | MIAM, FL. | | | | |
| TITLE | S | ☐ DELETE | 3 1 TITLE | | X | ldition | | | |
| NAME: | SANG, JOSE T | | 3 2 NAME | | SANG, JOSET. | | | | |
| STREET ADDRESS | 113 SW 107TH AVENUE | | 3 3. STREE | T ADDRESS | 113 SW 107TH AVE. | | | | |
| CITY - ST - ZIP | MIAMI FL | | 3.4 CITY-1 | S1 - ZIP | miami, FL | | | | |
| TITLE | | DELETE | 4 1 TITLE | • | VP ☐ Change ☑ Add | dition | | | |
| NAME | | | 4 2 NAME | | SANG, YOUANDA 113 SW 107TH AVE. | | | | |
| STREET ADDRESS | | | 4 3 STREET | T ADDRESS | | | | | |
| CITY-ST-ZIP | | | 44 CHY- | ST- ZIP | MIAMI, FL | | | | |
| TITLE | | DELETE | 5 1 TITLE | | Change Add | dition | | | |
| NAME | | | 5.2 NAME | | | | | | |
| STREET ADDRESS | | | 5.3 STREE | T ADDRESS | | | | | |
| CITY-ST-ZIP | | | 5.4 CITY- : | ST-ZIP | | | | | |
| TITLE | | DELETE | 6 1 TITLE | | Change Add | idition | | | |
| NAME | | | 6.2 NAME | | | | | | |
| STREET ADDRESS | | | 6.3 STREE | T ADDRESS | | | | | |
| CITY-ST-ZIP | | | 6.4 CHY- | ST - 21P | | | | | |
| 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 eath; that I am an officer or director of the corporation of 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 allagrance, with an address. | | | | | | | | | |

Country

81 Name

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