FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

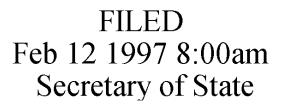
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P9400056591 (8)

DONG YING, INC.



Principal Plac 3334 CURRYFO ORLANDO FL	RD RD.	Mailing Address 3334 CURRYFORD RD. ORLANDO FL 32906-347						
					3. Date Incorporated or Qualified		e of Last Re	eport
2. Principal P	lace of Business	2a. Mailing Address			07/29/1994 4. FEI Number	05/0	1/1996	plied For
21	rado y pygomasa	26			59-3256267			t Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.					\$8.75	
22		27			5. Certificate of Status Desired		Fee Re	quired
City & Stat	e	City & State			6. Election Campaign Financing		\$5.00	
23	Gountry	28 Zip	Cou	ntnı	Trust Fund Contribution		Added t	
Zip 24	25	29	30	nuy	This corporation has liability for Florida Statutes	or intangible ti		199.032,
24	9. Name and Address of Cur		1301		10. Name and Address of New I			
A HILL	NG, MENG D			81 Name			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	CURRYFORD RD.			82 Street Add	dress (P.O. Box Number is Not Accept	ablei		
	ANDO FL 32806				Total Box Hamilton To Harrison			
•				83				
				84 City			85 Zip (Code
						FL	1 1 1	
SIGNATURE	Signature: typico or printed name of registores	d agent and title if applicable (N	OTE: Registere		poration submits this statement for the ation's board of directors. I hereby acc ared when renstating)	DATE		
12.		AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFF		DIRECTOR Change	S IN 12
TILE	D AFNO D		1 1 T(Į.	•	·	change	Mudicion
NAME STREET ADDRESS	HUANG, MENG D 3334 CURRYFORD RD.			REET ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32806		1	TY-ST-ZIP				
TITLE	D	DELETE	2.1 10				Change	Addition
NAME	CHEN, JIU Y	_	2.2 N/	ME				
STREET ADDRESS	3334 CURRYFORD RD.		2.3 \$1	REET ADDRESS				
CITY-ST-ZIP	ORLANDO FL 32806		2.40	ITY-ST-ZIP				
TOLE		DELETE	3.1 TI	TLE		ī	Change	Addition
NAME			3.2 N/	AME				
STREET ADDRESS			3.3 \$	reet address				
CITY-ST-2II				ITY-ST-ZIP				
TITLE		DELETE	4,1 11			Į.	Change	Addition
NAME			4. 2 N	Y				
STREET ADDRESS				REET ADDRESS				
CITY - ST - ZIP		DELETE		TY-ST-ZIP		······································	Chanca	Addition
TITLE		C) pereig	5.1 Ti	ł		L	Change	L.J AGUIRON
NAME Danger Laborator			52 N	· ·				
STREET ADDRESS				REET ADDRESS				
CITY-ST-7IP		DELETE		TY-ST-ZIP			Change	Addition
TITLE			6.1 Ti			l	Urange	L Voguron
NAME			6.2 N	· · · · · · · · · · · · · · · · · · ·				
STREET ADDRESS				REET ADDRESS				
CITY-SI-7IP			6.4 CI	TY - 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 eath; 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

JUSTY AUCH REQUIRED

215/97

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