FILE NOW: FILING FEE AFTER MAY 1 IS $55[illegible]

FILED
May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mor[illegible]
Secretary of St[illegible]
DIVISION OF CORPORATIONS

DOCUMENT # **P94000061977 (2)**

1. Corporation Name
FCH INTERNATIONAL ENTERPRISES, INC.

Principal Place of Business	Mailing Address
8227 N.W. 68TH STREET MIAMI FL 33166	8227 N.W. 68TH STREET MIAMI FL 33166-2760

3. Date Incorporated or Qualified: 08/23/1994
3a. Date of Last Report: 10/11/1996

2. Principal Place of Business
21: 8244 NW 68th ST
22: Suite, Apt. #, etc.
23: City & State: Miami Florida
24: Zip: 33166 25: Country: USA

2a. Mailing Address
26: 8244 N.W. 68th ST.
27: Suite, Apt. #, etc.
28: City & State: Miami Florida
29: Zip: 33166 30: Country: USA

4. FEI Number: 65-0519642 ☐ 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

9. Name and Address of Current Registered Agent

CHUKUONG, FERNANDO
6819 N.W. 84TH AVENUE
MIAMI FL 33166

10. Name and Address of New Registered Agent

81 Name: Chukuong, Fernando
82 Street Address (P.O. Box Number is Not Acceptable): 8244 N.W. 68th Street
83
84 City: Miami FL 85 Zip Code: 33166

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 [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

TITLE	PD	☐ DELETE
NAME	CHUKUONG, FERNANDO	
STREET ADDRESS	6819 N.W. 84 AVENUE	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE	MGR	☒ DELETE
NAME	MULLERT, MARIA J	
STREET ADDRESS	6819 N.W. 84 AVENUE	
CITY-ST-ZIP	MIAMI FL 33166	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE	PD	☒ Change ☐ Addition
1 AME	CHUKUONG, FERNANDO	
1 REET ADDRESS	8244 N.W. 68th ST.	
1 TY-ST-ZIP	MIAMI, FLORIDA 33	
2 TLE		☐ Change ☐ Addition
2 AME		
2 REET ADDRESS		
2 ITY-ST-ZIP		
3 TLE		☐ Change ☐ Addition
3 AME		
3 REET ADDRESS		
3 ITY-ST-ZIP		
4 TLE		☐ Change ☐ Addition
4 AME		
4 REET ADDRESS		
4 Y-ST-ZIP		
5 TLE		☐ Change ☐ Addition
5 AME		
5 REET ADDRESS		
5 Y-ST-ZIP		
6 E		☐ Change ☐ Addition
6 E		
ET ADDRESS		
ST-ZIP		

CR2E034 (9/96)

14. I do hereby certify that the information supplied with this filing does not qualify for [illegible] emption 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 a[illegible]curate 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 [illegible]cute 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 [signature]