

FILE NOW: FILING FEE AFTER MAY 1 IS \$5500

FILED

May 06 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morone Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000061977 (2)

1. Corporation Name

FCH INTERNATIONAL ENTERPRISES, INC.

Principal Place of Business

6227 N.W. 68TH STREET
MIAMI FL 33166

Mailing Address

6227 N.W. 68TH STREET
MIAMI FL 33166-2760



2. Principal Place of Business

21 8244 NW 68th ST

2a. Mailing Address

26 8244 N.W. 68th ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Miami Florida

City & State

28 Miami Florida

Zip

24 33166

Country

25 USA

Zip

29 33166

Country

30 USA

9. Name and Address of Current Registered Agent

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

3. Date Incorporated or Qualified

08/23/1994

3a. Date of Last Report

10/11/1996

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

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

84 City Miami

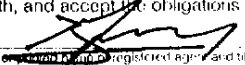
FL

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


Signature typed on separate sheet of paper and attached to this filing (if applicable)

(NOTE: Registered Agent Signature Required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE PD
NAME CHUKUONG, FERNANDO
STREET ADDRESS 6819 N.W. 84 AVENUE
CITY-ST-ZIP MIAMI FL 33166

☒ DELETE

TITLE MGR
NAME MULLERT, MARIA J
STREET ADDRESS 6819 N.W. 84 AVENUE
CITY-ST-ZIP MIAMI FL 33166

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

TITLE PD
NAME CHUKUONG, FERNANDO
STREET ADDRESS 8244 N.W. 68th ST.
CITY-ST-ZIP MIAMI, FLORIDA 33

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

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TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for information indicated on this annual report or supplemental annual report is true and correct. I am an officer or director of the corporation or the receiver or trustee empowered to appear in Block 12 or Block 13 if changed, or on an attachment with an address change.

SIGNATURE

omption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the signature and that my signature shall have the same legal effect as if made under oath, that I execute this report as required by Chapter 607, Florida Statutes; and that my name

CR2E034 (9/96)