SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B Mortha ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS **DOCUMENT #** P94000063810 (3) CHINA-AMERICA INTERNATIONAL TRADING, INC Principal Place of Business Mailing Address 9700 NW 14TH ST 9700 NW 14TH SH CORAL SPRINGS FL 33065 CORAL SPRINGS FI 1:1065 3. Date incorporated or Qualified 3a. Date of Last Report 08/29/1994 08/15/1995 Principal Place of Business Mailing Address 4. FEI Number Applied For 21 26 65-0522491 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 22 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Zip Added to Fees Country Country This corporation has liability for intangible tax under s. 199 032. 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent REN, LEMIN 81 GEOFFREY 9700 NW 14TH ST 82 nber (NOTArcentable) **CORAL SPRINGS FL 33065** 83 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above named corporation submits the statement for the purpose of changing its registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am family a with and accept the obligations of Section 607.0505, Fiorida Statutes. GEOFFREY SIGNATURE PRESIDEUT 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE (36/8)**DPST** DELETE 1.1 TITLE DPST **∨** Change NAME REN, LEMIN 1.2 NAME GEOFFREY CR2E034 STREET ADDRESS 9700 NW 14TH ST 13 STREET ADDRESS 9700 NW CORAL SPRINGS FL 33065 CITY-ST-ZIP 1.4 CiTy - ST - 7IP TITLE DELETE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY - ST - ZIP 2 4 CITY - ST - ZIP TITLE DELETE 3 1 TITLE Change ___ Addition NAME 3 2 NAME STREET ADDRESS 33 STREET ADDRESS CITY-ST-ZIP 34 CITY-ST-ZIP TITLE | DELETE 41 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST-ZIP 44 CITY - ST ZIP TITLE DELETE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY -ST - ZIP TITLE DELETE 61 TITLE 400001912954 -08/05/96--01043--039 ***225.00 NAME 62 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 is voluntarity furnished and does not qualify for the exemption stated in Section 119 07(3)(x), Florida Statutes 1 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 that my name appears in Block 12 or Block 13 if changed, or on all attachment with an address SIGNATURE: SIGNATURE AND EXPENDED OR PRINTED NAME OF SIGNING OFFICER