FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR -5 AM 12:00

DOCUMENT # **P94000069134 (2)**

1. Corporation Name
HIGHLIGHTS INTERNATIONAL, INC.

Principal Place of Business	Mailing Address
15070 SOUTHWEST 112 TERRACE MIAMI FL 33196	15070 SOUTHWEST 112 TERRACE MIAMI FL 33196

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 09/20/1994
3a. Date of Last Report: N/A

2. Principal Place of Business 21: = Al above
2a. Mailing Address 26: = Al above
4. FEI Number: 65-053-5260 ☐ Applied For ☐ Not Applicable

Suite, Apt. #, etc. 22:
Suite, Apt. #, etc. 27:
5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

City & State 23:
City & State 28:
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

Zip 24 / Country 25:
Zip 29 / Country 30:
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mandating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	11 TITLE	Vice President	☐ Change ☑ Addition
NAME	SUN, CHI-HSUN	12 NAME	Yan-Yew Yee	
STREET ADDRESS	15070 SOUTHWEST 112 TERRACE	13 STREET ADDRESS	9453, SW 76st #S-5	
CITY-ST-ZIP	MIAMI FL 33196	14 CITY-ST-ZIP	Miami FL 33173	
TITLE		21 TITLE	Treasury	☐ Change ☑ Addition
NAME		22 NAME	I-Chen Lee	
STREET ADDRESS		23 STREET ADDRESS	15358 SW 113 Terr	
CITY-ST-ZIP		24 CITY-ST-ZIP	Miami FL 33196.	
TITLE		31 TITLE	Secretary	☐ Change ☑ Addition
NAME		32 NAME	Da-Ming Fang	
STREET ADDRESS		33 STREET ADDRESS	15070, SW 112 Terr	
CITY-ST-ZIP		34 CITY-ST-ZIP	Miami FL 33196.	
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

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)(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 oath; 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: I-Chen Lee I-Chen Lee 3/27/95 386-4307
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0208398 CP