FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

DOCUMENT # P94000075622 (8)

1. Corporation Name
ZU HSIN, INC.

Principal Place of Business
14497 N DALE MABRY HWY
SUITE 201
TAMPA FL 33618

Mailing Address
14497 N DALE MABRY HWY
SUITE 201
TAMPA FL 33618

3. Date Incorporated or Qualified: **10/13/1994**
3a. Date of Last Report: **08/16/1995**

4. FEI Number: ~~-APPLIED FOR~~ 59-3274677 ☐ 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

2. Principal Place of Business
21 Consulting Service
Suite, Apt. #, etc.
22 8748 Witten Wood Cv.
City & State
23 orlando FL
Zip 24 32836
Country 25 orange

2a. Mailing Address
26 8748 Witten Wood Cv
Suite, Apt. #, etc.
27 orlando FL 32836
City & State
28
Zip 29 32836
Country 30

9. Name and Address of Current Registered Agent
- HUANG, CHEN-DEI
14497 N DALE MABRY HWY
SUITE 201
- TAMPA FL 33618

10. Name and Address of New Registered Agent
81 Name: Christine Chen
82 Street Address (P.O. Box Number is Not Acceptable): 8748 witten wood cove
83
84 City: orlando FL FL 85 Zip Code: 32836

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 or Printed of Corporate Officer or Registered Agent (Required when changing) — DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	HUANG, CHEN-DEI	
STREET ADDRESS	14497 N DALE MABRY HWY SUITE 201	
CITY-ST-ZIP	TAMPA FL 33618	
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		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	president	☒ Change ☒ Addition
1.2 NAME	Chen Shu-Chia Yen	
1.3 STREET ADDRESS	8748 Witten Wood Cv	
1.4 CITY-ST-ZIP	orlando FL 32836	
2.1 TITLE	Secretary	☐ Change ☒ Addition
2.2 NAME	CHRISTINE CHEN	
2.3 STREET ADDRESS	8748 Witten wood Cv	
2.4 CITY-ST-ZIP	orlando FL 32836	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	200001843791	☐ Change ☐ Addition
5.2 NAME	-05/30/96--01013--009	
5.3 STREET ADDRESS	***200.00	
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME	5-1-96	
6.3 STREET ADDRESS		
6.4 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)(k), 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Christine Chen — Date — 407-876-7241 Daytime Phone #

CR2E034 (12/95)