FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

P94000082546 (0)

AMERICAN CHINESE EUROPEAN INTERNATIONAL TRADING MANUFACTURING AND MACHINERY SALES INC.

| Principal Place of Business | |
|---|--|
| 1037 92ND STREET BAY HARBOR ISLANDS FL 33154 | |

Mailing Address

FILED Apr 23 1998 8:00am Secretary of State



| BAY HARBOR ISLANDS FL 33154 BAY | | | BAY HABOR ISLANDS FL 33154 | | DO NOT WRITE IN THIS | · ODACE | | |
|---|---|----------------------------------|---|--|--|-----------------------------------|-------------------|--|
| US I | | US | | | 3. Date Incorporated or Qualified 11/07/1994 | SPACE | | |
| 2 Principal Pl | Iace of Rusiness | 2a. Mailing Address | | | 4. FEI Number | | unled For | |
| len g ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' | | | 055 | | 65-056 1388 | Applied For Not Applicable | | |
| 26 | | | | | | | | |
| 22 2 | | 27 | 27 | | 6. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| City & State City & State 23 28 | | | | | 6. Election Campaign Financing Trust Fund Contribution | | May Be to Fees | |
| Zip | Country | 7(1) | Count | У | 8. This corporation owes or has paid the co | rrent year In | tangible | |
| 24 | 25 | 29 | 30 Personal Properly Tax due June 30 X Yes No | | |] No | | |
| | 9. Name and Address of Curre | nt Registered Agent | | ··· | 10. Name and Address of New Registered | Agent | | |
| | BSTER, URSULA | | 8 | 81 Name | | | | |
| 1037-92ND STREET | | 8 | 2 Street A | et Address (P.O. Box N umber is Not Acceptable) | | | | |
| БА | BAY HARBOR ISLANDS FL 33154 | | 8: | 3 | | | | |
| | | | 8 | 1 City | FI | 85 Zip | Code | |
| 11. Pursuant t | to the provisions of Sections 607 05 | 02 and 607 1508 Florida Statu | les the abo | ve-named o | corporation submits this statement for the purpose | e of changing i | its registered | |
| l office or re | e nister ed about or both, in the State | e of Florida. Such change was | authorized E | withe corn | oration's board of directors. I hereby accept the ap | pointment as | registered | |
| 1 | m familiar with, and accept the oblic | јавона от, зесноп вои озов, гт | oncia Siaiule | 28. | | | | |
| SIGNATURE | Signature, typed of printed name of regulation ag | ocet and life d'apple dale. (NO) | II Registered A | pent Signature r | required when reinstating) DATE | | | |
| 12. | | ND DIRECTORS | 13. | | ADDITIONS/CHANGES TO OFFICERS AN | D DIRECTOR | RS IN 12 | |
| TITLE | PSTD | DELETE | 1.1 TOLE | | | Change | Addition | |
| NAME) | WEBSTER, KENNETH | | 1.2 NAME | | | |): | |
| STREET ADDRESS | 1037-92ND STREET | | | T ADDRESS | | | 13 | |
| CITY-ST-ZIP | BAY HARBOR ISLAND FL | | 1.4 CHY- | | | | | |
| TITLE | V | □ DELETE | 2.1 TILLE | 51-20 | | Change | Addition | |
| NAME | WEBSTER, URSULA | <u></u> | 2.2 NAM8 | | | | | |
| STREET ADDRESS | 1037-92ND STREET | | | T ADDRESS | | | | |
| CITY-ST-ZIP | BAY HARBOR ISLANDS FL | | 2 4 CITY | i i | | | 1 | |
| TITLE | OKT TANDON IODANOOTE | DETETE | 3.1 TITLE | -31-41 | | Change | Addition | |
| NAME | | L | 3.2 NAME | | | 4-10-190 | | |
| STREET ADDRESS | | | | 1 ADDRESS | | | | |
| 1 ' ' 1 | | | 1 | 1 | | | 1 | |
| CITY-ST-ZIP TITLE | | DELETE | 3.4. CHY 4.1 TRLE | -31-71 | | Change | Addition | |
| NAME | | [] <i>Victori</i> | 4.2 NAM | . | | - Sumings | | |
| | | | 1 | i i | | | 1 | |
| STREET ADDRESS | | | | T ADDRESS | | | | |
| CITY-ST-ZIP | | DELETE | 4.4 C(TY | ST-ZIP | | Change | Addition | |
| TITLE | | C" T DETELL | 5.1 TITLE | ļ | | Change | L Addition | |
| NAME | | | 5.2 NAME | ſ | | | 1 | |
| STREET ADDRESS | | | | T ADDRESS | | | f | |
| CITY-ST-ZIP | | | 5.4 CITY | S1 - 7IP | | | | |
| TITLE | | ☐ DELETE | 6111111 |] | | Change | ☐ Addition | |
| NAME | | | 6.2 NAME | [| | | 1 | |
| STREET ADDRESS | | | 63STRFE | I AODRESS | | | | |
| CITY-ST-ZIP | | • | 6.4 CITY - | S1 - 7/P | | | | |

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this aimula report or suppliemental aimula report is true and accurate and that my signature shall have the same logal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted 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.