FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996 **DOCUMENT #**

P95000003311 (4)

1. Corporation	Name	•	•						
SHUN LI TONG, INC.									
Principal Place of	of Business	Mailing Address					JER 88111 88111 8		
10 SW 6TH ST 10 SW 6TH ST									
POMPANO BEACH FL		POMPANO BEACH FL							
						 Date Incorporated or Qualified 01/12/1995 	3a. Date	of Last Re	eport
Principal Place of Business 2a. Mailing Address						4. FEI Number	-		Applied For
· · · · · · · · · · · · · · · · · · ·		26				65-0547990	<u> </u>		Not Applicable
Suite, Apt. #, etc		Surte, Apt. #, etc.				5. Certificate of Status Desired		•	Additional Required
City & State		Gity & State	City & State			6. Election Campaign Financing			
23		28	T '			Trust Fund Contribution			May Be d to Fees
Zip	Country	Ζφ	Country		- 1	8. This corporation has liability for	intangible ta		
24	25 29 30						Yes No		
	g. Name and Address of Curre	ent Registered Agent	81			10. Name and Address of New F	legistered A	.gent	
5411 6			61	Name					
PAN, CHAI M			82	Street /	Address	(P.O. Box Number is Not Acceptab	ole)		
10 SW 8TH ST POMPANO BEACH FL			83						
PUMPA	NU DEAUTI FL								
			84	City			FL	85 Zip	p Code
11. Pursuant to	the provisions of Sections 607.050	02 and 607.1508, Florida Statutes	s, the above r	named co	orporatio	on submits this statement for the pu		<u>t</u> naina its r	eaistered office
or registere	d agent, or both, in the State of Flo i, and accept the obligations of, Se	rida. Such change was authorized	d by the corp	oration's	board c	of directors. Thereby accept the app	ióintment as i	registered	agent. Lam
SIGNATURE	,								
	ignature typed or printed home of registers Lag-		Flags break Apa	t signature n	is julied wh	et randfating	()A'E		
12.	OFFICERS A			13.		ADDITIONS/CHANGES TO OFF			
TITLE	P CHAIN	DELETE	1 1 TITLE				<u> </u>	Change	Addition
NAME	40 000 070 07		1.2 NAME						
STREET ADDRESS	DOMPANO PEAGLE			1.3 STREET ADDRESS					
CITY-ST-ZIF TITLE				2 1 HTLE \$				Change	Addition
NAME	•	MING, STEVE		22 NAME A		I STEVE	LE.] 0 (4.190	
STREET ADDRESS	10 SW 6TH ST			23 STREET ADDRESS		SW ATH ST.			
CITY-ST-ZIF	POMPANO BEACH FL		24 C TY - S		170K	J, STEVE SW 6TH ST. A PANO BEACH, FL 33 0	obn		
TITLE	<u></u>	☐ DELETE	3 1 TITLE		7 2.	3 1133	Ĺ	Change	☐ Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET	ADDRESS					
CITY - ST - ZIF			3.4.C(TY-S	1 - ZIP					
TITLE		☐ DELETE	4 1 T TLE					Change	Addition
NAME			4.2 NAME						
STREET ADDRESS			4 3 5 FREE 1	ADDRESS					
CITY - ST - ZIF		Fig. Sec. Sec.	4.4.C+TY+S	1 - 7#°	L		<u>_</u>		
TITLE			5 1 T.TLE				L] Change	Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STALET						
CITY - ST - ZIF			5 4 CITY - S	1 - ZIF	 			7 Chance	Addition
TITLE NAME		Dorcer	6 1 T-TLE				L] Change	☐ Pagarest
STREET ADDRESS			6.2 NAME	AUDSCCC					
CITY-ST-ZIF			6.3 STREET						
OH FOLKUE			6.4 CITY - S	1 - 2 11	1				

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 true same legal effect as if made under oath; that I am an officer or director of the conjunation or the receiver or trustee emplowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND STREET OF PRINTED JAME OF SIGNING OFFICE OF SIGNING OF SIGNING OFFICE OF SIGNING OF SIGNING OFFICE OF SIGNING OF S