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**Apr 01 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # P95000022996 (9)

1. Corporation Name
WUHAN VICTORY HOTEL, INC. FLORIDA U.S.A.



Principal Place of Business
8502 N ARMENIA 1B TAMPA FL 33624 US

Mailing Address
15120 NATURE WALK TAMPA FL 33624-2339

3. Date Incorporated or Qualified **03/20/1995** 3a. Date of Last Report **05/01/1996**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21 8502 N. Armenia Ave	26 8502 N. Armenia Ave	59-3305602	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
22 STE 1 B	27 STE 1 B	6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
City & State	City & State	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
23 Tampa, FLORIDA	28 Tampa, FLORIDA		
Zip	Zip		
24 33604	29 33604		
Country	Country		
25 USA	30 U.S.A.		

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WAN, YA PING 8502 N ARMENIA 1B TAMPA FL 33606	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 14906 EVERSHINE ST. 83 84 City Tampa 85 Zip Code FL 33624

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	S WAN, YA PING	1.2 NAME	GE, XIAO WEN
STREET ADDRESS	8502 NARMENIA #1B	1.3 STREET ADDRESS	33624
CITY-ST-ZIP	TAMPA FL	1.4 CITY-ST-ZIP	15120 NATURE WALK DR. TAMPA FL
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	Li, JUN
STREET ADDRESS		2.3 STREET ADDRESS	14906 EVERSHINE ST. TAMPA FL 33624
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 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 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: _____ **3-26-97 813-963-3148**
Date Daytime Phone #

CR2E034 (9/96)