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Apr 02 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000029953 (3)

1. Corporation Name
CHAMP INTERNATIONAL, INC.



Principal Place of Business 4642 EAGLEWOOD DRIVE ORLANDO FL 32817 US	Mailing Address 4642 EAGLEWOOD DRIVE ORLANDO FL 32817-3370 US
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 04/11/1995	3a. Date of Last Report 06/24/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 65-0572847	Applied For Not Applicable
22 City & State	27 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent LUOU, JENG-SYAN 4642 EAGLEWOOD DRIVE ORLANDO FL 32817	10. Name and Address of New Registered Agent 81 Name LYOU, JENG-SYAN 82 Street Address (P.O. Box Number is Not Acceptable) 4642 EAGLEWOOD DRIVE 83 84 City ORLANDO FL 85 Zip Code 32817
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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 Jeng-Syan Lyon JENG-SYAN LYOU, President 3/27/97
Signature type: printed name of registered agent, if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LYOU, JENG-SYAN	1.2 NAME	
STREET ADDRESS	4642 EAGLEWOOD DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32817	1.4 CITY-ST-ZIP	
TITLE	VP	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FANG-MIAO, LIU	2.2 NAME	FANG-MIAO, LIU
STREET ADDRESS	4642 EAGLEWOOD DRIVE	2.3 STREET ADDRESS	4642 EAGLEWOOD DRIVE
CITY-ST-ZIP	ORLANDO FL 32817	2.4 CITY-ST-ZIP	ORLANDO, FL 32817
TITLE		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		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		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		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: JENG-SYAN LYOU 3/27/97 407-678-

CR2E034 (9/96)