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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P95000029953

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
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26 15012 NE 8th place		04/11/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		65-0572847	
City & State		City & State		Applied For	
23		28 Bellevue, Washington		Not Applicable	
Zip		Zip		5. Certificate of Status Desired	
24		29 98007		30 US A	
Country		Country		8. This corporation owes the current year Intangible	
25		30		Personal Property Tax.	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		81 Name	
LYOU, JENG-SYAN		82 Street Address (P.O. Box Number is Not Acceptable)		83	
4642 EAGLEWOOD DRIVE		84 City		85 Zip Code	
ORLANDO FL 32817		FL			

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 Lyou JENG-SYAN LYU, President DATE 2/28/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	
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	
NAME	FANG-MIAO LIU	2.2 NAME	
STREET ADDRESS	4642 EAGLEWOOD DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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, with all other like empowered.

SIGNATURE: Jeng-Syan Lyou JENG-SYAN LYU DATE 2/28/99

CR2E034 (11/98)