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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Apr 06 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000032773 (0)

1. Corporation CHABI	on Name I CORPOR/		00000277	o (o)							
Principal Place of Business Mailing Address								<b>Je</b> in <b>Ji</b> ni <b>Fe</b> i			
7148 SW 8TH ST 7148 SW 8TH ST											
MIAMI FL 33				MIAMI FL 33144							
US			US	US			DO NOT WRITE IN THIS SPACE				
ļ							3. Date incorporated o	Qualified			
A 632 T	51. <del></del>						04/26/1995				
2. Principal Place of Business			<del>                                     </del>	2a. Mailing Address			4. FEI Number			A	pplied For
Suite, Apt. #, etc.				Suite, Apt. #, etc.			65-0606463				ot Applicable
22	. #, etc.		<u> </u>	<u> </u>			5. Certificate of Status	Desired	□ \$		Additional
City & Sta	te		27 City & Sta	City & State							equired
23			├ <del>─</del> ┐ '	28			6. Election Campaign F Trust Fund Contribut	_			May Be
Zip Country			·	Zip Coui			8. This corporation owe				to Fees
24	<del></del>		29	3	30		Personal Property Ta				No No
	9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent				
W	ONG, DALTO	NL			81	Name	1 14				
71	48 SW 8TH	ST		82 Street Ad			room (P.O. Play Number in Ne	IN L	(0.)		<del></del>
M).	AMI FL 3314	4		62 Sire			ress (P.O Box Number is No	AVE	"Apt 2	.04	•
					83				<del></del>		
					84	Cau				. 1 -2:	<del></del>
						'M\-	ami		FL 85	123	Code 4
11. Pursuant	to the provisio	ns of Sections 60	07.0502 and 607.1508, FI	orida Statutes	the abov	e-named corr	poration submits this statemention's board of directors. I he	int for the pu	urpose of cha	nging il	ls registered
agent. I a	am familiar with	nt, or both, in the i, and accept the	e State of Florida, Such of obligations of, Section 6	nange was aut 07.0505, Florid	inorizea b da Statute	y the corpora s.	tion's board of directors. I he	reby accept	t the appointn	nent as	registered
SIGNATURE											
	Signature, typed or		ered agrint and title 4 applicable	(NO1E: F		ent signature requ	red when reinstating)		DATE		
12. TITLE	- Б	OFFICE	RS AND DIRECTORS	DELETE	13.	<del></del>	ADDITIONS/CHANGE:	TO OFFICE			
NAME	WONG T	ALTON L	اجا	DELETE	1.1 TITLE				[]	Change	☐ Addilion
•	7148 SW				1.2 NAME						
STREET ADDRESS	MIAMI FL				1	T ADDRESS					
CITY-ST-ZIP TITLE	- INVANIL			DELETE	1.4 CITY - : 2.1 TITLE	ST- ZIP			<del></del>	Channa	T Laurence
NAME			لبما	DELLIC						Change	Addition
STREET ADDRESS					2.2 NAME						
CITY-ST-ZIP						ADDRESS					
TITLE				DELETE	2. 4 CITY- 3.1 TITLE	SI-ZIP	7110		<del></del>	Change	Addition
NAME				010012	3.2 NAME				، ب	วแขนกัด	Monthos
STREET ADDRESS					33 STREET	ADDDCCC					
CITY-ST-ZIP											
TITLE				DELFTE	3.4. CHY-	51-ZIP			——————————————————————————————————————	Change	Addition
NAME				DI 11.C	4. 2 NAME				ا اسا	Jianyo	Madriduit
STREET ADDRESS						. 400001.00					
CITY-ST-ZIP					4.3 STREFT						
TITLE	·			DELFTE	4.4 CITY-S 5.1 TITLE	51 - ZIP		<del></del>		Change	Addition
NAME					5.2 NAME				ا لسا	manyc	L VOOIION
STREET ADDRESS					5.3 STREET	ADDRESS					
CITY-ST-ZIP											
TITLE			П	DELETE	5.4 CITY-S 6.1 TITLE	017415				Change	Addition
NAME			لسا		6.2 NAME				با لــــ	- range	Addition
STREET ADDRESS					6.3 STREET	ADDRESS					
CITY ST_ 7IP					0.3 SINCE	7 70					

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 excelver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if page transfer or an attachment with an address.

LATURE. WILLIAM STATE OF CALLED IN THE STATE OF THE STATE