SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) FLORIDA DEPARTMENT OF STATE PROFIT CORPORATION Sandra B. Mortham ANNUAL REPORT etary of State CORPORATION DOCUMENT #

1. Corporation Name P95000063222 (0) HENG SENG CORPORATION Mailing Address Principal Place of Business 8433 FOREST HILL DRIVE 8433 FOREST HILL DRIVE CORAL SPRINGS FL 33063 **CORAL SPRINGS FL 33063** 3a. Date of Last Report 3. Date Incorporated or Qualified 08/16/1995 Applied For 2a. Mailing Address FEI Number 2. Principal Place of Business 65-0601419 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt #, etc 5. Certificate of Status Desired Fee Required APT. # 208 27 22 **\$5.00** May Be City & State 6. Election Campaign Financing City & State Added to Fees Trust Fund Contribution 28 23 This corporation has liability for intangible tax under s. 199 032 Country Country 210 Zip 🔲 Yes 🔲 No Florida Statutes 30 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD Street Address (P.O. Box Number is Not Acceptable) 82 343 ALMERIA AVENUE **CORAL GABLES FL 33134** 83 Zip Code 85 City 84 11. Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-trained 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. Thereby accept the appointment as registered agent. Tam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE thrill. Registered Agent signature required when reles' degi-Stignar iral type dioripi medician ie of tegis and agend and the it apped abli ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (3/96) 13. OFFICERS AND DIRECTORS 12. Addition Change DELETE 1.1 THE STD THLE PD LIN, XIE BIN CR2E034 1.2 NAME CHOY, LAI SOO 8433 FOROST HILL DRIVE APT # 208 NAME 13 STREET ADDRESS 8433 FOREST HILL DRIVE STREET ADDRESS CICAL SPRINGS FL 33063 14 CHY-ST-ZIP CORAL SPRINGS FL 33063 CITY - ST - ZIP Charge Addition DELETE 21 THLE TITLE VD. 2.2 NAME RONG LI, JIAN NAME 2.3 STREET ADDRESS 8433 FOREST HILL DRIVE STREET ADDRESS 2 4 CITY - ST - ZIP CORAL SPRINGS FL 33063 CITY - ST - ZIF Change Addition 31 TIT.E DELETE TITLE STO FENG, HUI CONG NAME 3.3 STREET ADDRESS 8433 FOREST HILL DRIVE STREET ADDRESS 3.4 CHY-SI-ZIP CORAL SPRINGS FL 33063 CITY - SI - ZIP Change Addition DELETE 4 I TILLE TIFLE NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 5.1 THLE TITLE NAME 5 3 STREET ADDRESS STREET ADDRESS 5.4 CiTY - ST - 7iP CITY-SI-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6 3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP ton surplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k). Fionda Statutes, I not cated on this armusl report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if are or directly of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and CITY-ST-ZIP I do hereby certify that the inform further certify that the information made under oath, that I am an of changed, or on an attachment with an address that my name appears in Block 8/16/96 (561) 487-6940

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE