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

PROFIT. **CORPORATION ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

P95000076753

COMMERCE & TRADE CENTER

FILED Jun 04 1997 8:00am Secretary of State

	SIMV COMME	1,00		, , , , , , , , , , , , , , , , , , ,	
Principal Plac	ce of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·	·	
10839 HAMPTON Rd					
1					
JACKSONVILLE, FL 32257 SAME				3. Date incorporated or Qualified 3a. Date of	Lasi Report
<u> </u>					
2. Principal Place of Business 2a. Mailing Adi		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02	Not Applicable 75 Additional
22		27			Fee Required
City & State		City & State		6. Election Campaign Financing \$	5.00 May Be
28 28				Trust Fund Contribution A	idded to Fees
Zip	Country Zip 29		Country	8. This corporation has liability for intangible tax un	
24 25 29 30 30 9. Name and Address of Current Registered Agent			[30]	Florida Statutes Yes No 10. Name and Address of New Registered Agent	
81 Name					
SHIMIN LANG 82 Street Address (P.O. Box Number is Not Acceptable)					
19839 HAMPTON RD				docress (F.O. Box Number is Not Acceptable)	
4	•	• •	63		
<i>U</i>	ACKSONVILLE,	FL JANS T	B4 City	es 85	Zip Code
	10 0000	20 1 227 45 02 54 1 20		 - _	· ;
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 jamilar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE Signature typed of inflod name of registered agent and title if applicable (NOTE Registered Agent signature required				required when reinstating) DATE	
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12
TITLE	•	☐ DELETE	11 TITLE	P/C ZHAO, CHANGJIANG 10839 HAMPTON Rd.	nange 🔲 Addition
NAME			1.2 NAME	ZHAU, CHANGS IANG	
STREET ADDRESS			1 3 STREET ADDRESS		
CITY-ST-ZIP TITLE	☐ DELETE		1.4 CITY - ST - ZIF' 2.1 TITLE	VC DOCK	nange Addition
NAME		_	2 ? NAME	V (
STREET ADDRESS			2.3 STREET ADDRESS	# 6 BINGNIAN ST NANGO	NG
CITY-ST-ZIP			2 4 CITY-ST-ZIP	HUANG, HENGYIN # 6 RINGNIAN ST. NANGO, HEBEL, CHINA	
TITLE		DELETE	3) 10 Li	T/D 13-01	nange 🔲 Addition
NAME			3 2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS	SHIMIN LANG 10839 HAMPTON Rd. JACKSENVILLE, FL 32257	•
CITY-ST-ZIP TITLE		DELETE	3.4 CHY+\$1-ZIP 4.1 HILL	JACKSON VILLE, FL >225 1	nange Addition
NAME		L	4. 2 NAME		ange L1 notition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	·		4.4 CITY- \$1-7/P	/	
TITLE		☐ DELETE	5.1 HTLE.	☐ Ch	nange
NAME			5.2 NAME		1.6
STREET ADDRESS			5.3 STREET ADDRESS	# (d)	11197
CITY-ST-ZIP TITLE		☐ DELFTE	5 4 CHY-SI-ZIP	$\mathcal{L}_{\mathcal{L}}}}}}}}}}$	7/ /
NAME			6.1 TITLE 6.2 NAML	10000228933	Δυίμα
STREET ADDRESS			G.3 STREET ADDRESS	1000022 6 9331 -06/11/9701109033	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	***165.00	
	ov certify that the information supplic	d with this filing does not qualify		ated in Section 119 07(3)(4) Florida Statutes, I further certify	v 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 eath; that it is an 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.

CHANGJANG ZHAO 4-22-97 904-880-3949