FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. ModHare 🕟 Secretary of State ANNUAL REPORT DIVISION OF CORPORATIONS 1996 P95000091875 (1) **DOCUMENT #** Corporation Name FORTUNE INC. Mailing Address Principal Place of Business 11924 FOREST HILL BLVD NO 24 & 25 11924 FOREST HILL BLVD NO 24 & 25 WEST PALM BEACH FL 33414 WEST PALM BEACH FL 33414 3. Date Incorporated or Qualified 3a. Date of Last Report 12/04/1995 Applied For FEI Number 2a. Mailing Address 2. Principal Place of Business 65-0610130 Not Applicable \$8,75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be City & State City & State \Box Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes 🔲 Yes 💢 No Country Zip 210 30 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name Street Address (P.O. Box Number is Not Acceptable) CHING, SHIH C 82 13729 YARMOUTH DR 83 **WELLINGTON FL 33414** 1. 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. Thereby accept the appointment as registered agent. Lam familiar with, any accept the obligations of Section 607,0505, Florida Statutes. 3/10/96 OFFICERS AND DIRECTORS IN 12 (NOT: Registered Agent signature required when reinstaling) SIGNATURE OFFICERS AND DIRECTORS 5HZH C CHING presidence Addition [] DELETE CHING 1 TITLE THILE President HIII BIND #2 NAME Well gron, FC, STREET ADDRESS 33416 1.4 CITY - \$1 - ZIP CHY-ST-ZIP Change [T] Addition (") DELETE 2.1 11115 TITLE 2.2 NAME NAME 23 STREET ADDRESS STREET ADDRESS 24 CHY+S*-ZIP $CHY \circ ST \circ Z(E)$ [T] Change ____ Anditina DECENE 3 1 TITLE TITLE 3 2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS

6.4 CITY - \$1 - 7(P) 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119 07(3)(k), 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 eath; 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 attaction with an address.

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