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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000026437 (9)

CATHAY SHOES, INC.

Principal Place of Business	Mailing Address

FILED Apr 02 1997 8:00am Secretary of State



2451 N.W. 5TH MIAMI FL 3312		2451 N.W. 5TH AVE. MIAMI FL 33127-4311						
					3. Date Incorporated or Qualified 03/20/1996	3a. Date	of Last	Report
2. Principal Prace of Business 2a. Mailing Address					4. FEI Number		/	Applied For
21 26					65-0653805	Not Applicable		
Suite. Apt. # leto: 22		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			
Orty & Star 23	ic.	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24	25 29						No.	
	9. Name and Address of Cur	rent Registered Agent			10. Name and Address of New Re	gistered Age	nt	
	MING CHE		[Name				
	1 N.W. 5TH AVE. MI FL 33127		[Street Add	dress (P.O. Box Number is Not Acceptab	ole)		***************************************
			[8	13				
		•	1	14 City		FL.	35 Zip	o Code
11. Pursuant office or i agent 1 a	to the provisions of Sections 607.0 registered agent, or both, in the Stam familiar with, and accept the ob-	1502 and 607,1508, Florida Stat ate of Florida: Such change wa digations of, Section 607,0505.	tutes, the abo s authorized Florida Statu	ove-named cor by the corpora tes.	poration submits this statement for the patient's board of directors. I hereby acceptions	ourpose of ch of the appoin	anging Iment a	its registered is registered
SIGNATURE	Specialize Type of repeating region of lengthered	actions and title 3 are the able (N	OTF: Boostwood	Anent signature regu	ulred when reinslating)	DATE		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND D	RECTO	PRS IN 12
TITLE	D	DELETE	1.1 TITE	E			Change	Additio
NAME	LAI, MING CHE		1.2 NAA	IE				
STREET ADDRESS.	2451 N.W. 5TH AVE.		1.3 S1R	EET ADDRESS				
CHY ST 70	MIAMI FL 33127	······································	1.4 CITY	-ST-ZIP				
THU	D	L] DELETE	2.1 TiTL	E		L.	Change	Addition
NAME	YANG, HUA		2.2 NAM					
STREET ADDRESS	2451 N.W. 5TH AVE.			EET ADDRESS				
City S1-7IP	MIAMI FL 33127	DELETE	2. 4 CIT 3.1 TITL	Y-ST-ZIP	<u> </u>		Change	Additio
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STREET ADDRESS				ELT ADDRESS				
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NAME			4. 2 NA	· .		_	•	
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CITY ST Zin				-ST-ZIP				
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NAME			5.2 NAM	re	•			
STREET ADDRESS			5 3 STA	EET ADDRESS				
C In - St. ZiP			5.4 CIT	-\$1-ZIP		_,		
1011		DELETE	6,1 1110	E			Change	e 🔲 Additio
NAME			6.2 NAM	ME				
STREET ADORESS	}		6.3 STH	EET ADDRESS				
CITY - ST - ZIF			6.4 CiT	r-ST-ZIP				

14. I do horeby certify that the information supplied with this filling 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 adverse.