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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000030616 (2)

AI CHEN INC.

## FILED May 12 1997 8:00am Secretary of State

Principa-Place of Business Mailing Address  1315 TUSKAWILLA ROAD 1315 TUSKAWILLA ROAD WINTER SPRINGS FL 32708 WINTER SPRINGS FL 32708										
				٠			3. Date incorporated or Qualifie 04/02/1996	d 3a. Date	of Last Re	port
	Place of Busine	68	2a. Mail	ng Address			4, FEI Number	<u></u>	Ap	plied For
21			26				59-330892			Applicable
Suite Ap	t. #, etc.		27	e, Apt. #, etc.			5. Certificate of Status Desired		<b>\$8.75</b> A Fee Re	
City & Sta	ite			& State			6. Election Campaign Financing	· · · · · · · · · · · · · · · · · · ·	\$5.00	<del>'</del>
23			28			····	Trust Fund Contribution	D	Added to	
Zф Гээт	ļ	Country	Zip		Countr	У	8. This corporation has liability f	or intangible ta		199.032,
24	9. Name a	od Address of Cu	29 Prrent Registered	Agent	30	·	Florida Statutes 10. Name and Address of New			
Cl	JRTIS, JANET				81	Name				
2131 HONTOON ROAD					82	Street Add	dress (P.O. Box Number is Not Accep	table)	<del></del>	
DE	LAND FL 327	20				<u> </u>	oroso (1.10. Don 110. Nosap			
					63	<b>'</b> [				
					84	City		FL	85 Zip (	Code
office of agent T	am familiar with	, and accept the d	ibligations of, Sec	tion 607.0505, Fi	orida Statule	35.	ation's board of directors. I hereby ac-			
SIGNATURE		printed name of requirers	en arjent and title if appli	cable. (NOT	E: Registered Ag	_	pired when reinstating)	DATE		S IN 12
		printed name of requirers	-	cable. (NOT		gent signature req	juired when reinstaling)  ADDITIONS/CHANGES TO OF	DATE FICERS AND D		
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To nevery certify that the information supplied with this thing does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes, intriner 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 open attachment with an address.

**SIGNATURE** 

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/91

iytimić Phone \*

0063030