


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

FILED  
May 12 1997 8:00am  
Secretary of State

<b>PROFIT CORPORATION ANNUAL REPORT 1997</b>  <b>DOCUMENT # P96000033063 (4)</b> 1. Corporation Name <b>RICE GARDEN HOLLYWOOD, INC.</b>	FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
--	---



Principal Place of Business <b>1832 S. YOUNG CIRCLE HOLLYWOOD FL 33</b>	Mailing Address <b>1832 S. YOUNG CIRCLE HOLLYWOOD FL 33020-6821 33</b>
--	---

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>04/16/1996</b>	3a. Date of Last Report
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number <b>65-0658802</b>		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	28 Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Country	29 Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
<b>LI, YI</b> <b>1832 YOUNG CIRCLE</b> <b>HOLLYWOOD FL 33020</b>		81 Name <b>Mei, Shaozhi</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>1832 Young Circle</b> 83 84 City <b>Hollywood</b> <b>FL</b> 85 Zip Code <b>33020</b>	

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 familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE **X Shaozhi Mei** **Shaozhi Mei** **04/16/97**  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	1.1 TITLE	<b>Director/President</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>LI, YI</b>	1.2 NAME	<b>Zhu, Defu</b>
STREET ADDRESS	<b>450 N.E. 210 CIRCLE TERRACE, APT. 202</b>	1.3 STREET ADDRESS	<b>1832 Young Circle, Hollywood, FL 33020</b>
CITY-ST-ZIP	<b>N MIAMI BEACH FL 33179</b>	1.4 CITY-ST-ZIP	
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<b>Director/Vice President</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>TU, SHIH</b>	2.2 NAME	<b>Mei, Shaozhi</b>
STREET ADDRESS	<b>4140 FERN FOREST ROAD</b>	2.3 STREET ADDRESS	<b>1832 Young Circle, Hollywood, FL 33020</b>
CITY-ST-ZIP	<b>COOPER CITY FL 33026</b>	2.4 CITY-ST-ZIP	
TITLE	<b>D</b> <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<b>Director/Secretary</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>ZHENG, REN S</b>	3.2 NAME	<b>Li, Zhiling</b>
STREET ADDRESS	<b>2050 DOUGLAS ROAD SUITE 108</b>	3.3 STREET ADDRESS	<b>1832 Young Circle, Hollywood, FL 33020</b>
CITY-ST-ZIP	<b>PEMBROKE PINES FL 33024</b>	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing 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 address.

SIGNATURE: **X Shaozhi Mei** **Shaozhi Mei** **04/16/97** **(954) 929-2838**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
**0128233**

CR2E034 (9/96)