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

**PROFIT CORPORATION ANNUAL REPORT** 

1**9**98

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000051762 (8)

FAR EAST COMPONENTS, INC.

Principal Plan	a of Rusinass	Mailing Address					
Principal Place of Business Mailing Address  831 VILLAGE BLVD 931 VILLAGE BLVD							
STE. 808		STE, 908					
WEST PALM BEACH FL 33409		WEST PALM BEACH FL 33409		DO NOT WRITE IN THIS SPACE			
					<ol> <li>Date Incorporated or Qualified</li> <li>06/22/1996</li> </ol>		
2. Principal P	lace of Business	2a, Mailing Address			4. FEI Number	I Ar	oplied For
21		26			65-0680443	<u>`</u>	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		Election Campaign Financing     Trust Fund Contribution			
Zip	Country	<b>7</b> (p	Cou	intry	8. This corporation owes or has paid the	current year Ini	langible
24	25	29	30		Personal Property Tax due June 30.		] No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Register	ed Agent	
	AM, HAI V			81 Name			
931 VILLAGE BLVD			82 Street Add	ress (P.O. Box Number is Not Acceptable)			
ste. <b>90</b> 8							
, WE	EST PALM BEACH FL 33409			83			
· •				84 City		85 Zip	Code
*				'		•L   `   ` `	
SIGNATURE	Signature, typied or prefled name of registered ag			i Agent signature requi	poration submits this statement for the purpos tion's board of directors. I hereby accept the Pod when reinstating)		
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	Р.	☐ DELETE	1.1 TI	TLE .		Change	Addition
NAME	PHAM, HAI V		12 N	AME			
STREET ADDRESS	931 VILLAGE BLVD, STE. 90		1.3 51	REET ADDRESS			İ
CITY-ST-ZIP	WEST PALM BEACH FL 334			TY-ST-ZIP			<del>-1</del>
TITLE	VP	L] DECETE	2.1 1	1		☐ Change	Addition
NAME	PHAM, TAM T	•	2.2 N				
STREET ADDRESS	931 VILLAGE BLVD, STE. 900		1	REF1 ADDRESS			
CITY-ST-ZIP	WEST PALM BEACH FL 3340			ITY-ST-ZIP		Channa	Addition
TITLE		☐ DELETE	3.1 10			Change	Addition
NAME ATRICT LIBERTON			3.2 NA	1			İ
STREET ADDRESS	· !			REET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. C	ITY-ST-ZIP		Change	Addition
NAME	1		4.1 II 4.2 N			change	
STREET ADDRESS				REE1 ADORESS			
CITY-ST-ZIP TITLE		DELETE	4.4 CI 5.1 T/I	IY-ST-ZIP		Change	Addition
NAME			5.2 N/	1	<b>9000024</b> 998 -04/24/8801061	020	
STREET ADDRESS			1	HEET ANDRESS	** <b>*1</b> 50,00		

14. I 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 pecciver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 12 or Block 12 if changed, or on an attachment with an address.

6 4 CITY-ST-ZIP

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE

Addition

Change

**FÎ**LED

Apr 23 1998 8:00am

Secretary of State

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