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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1997

POCUMENT # P96000067086 (4)

Mailing Address 1660 U.S. 1

VERO BEACH FL 32980-5543

TAIWAN EXPRESS, INC.

appears in Block 12 or Block 13 if changed,

SIGNATURE:

Principal Place of Business

VERO BEACH FL 32960

1660 U.S. 1

3. Date Incorporated or Qualified 3a. Date of Last Report 08/13/1996 4. FEI Number 2. Principal Prace of Business 2a. Mailing Address Applied For 59-3398831 26 21 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Žφ Country Country Zio This corporation has liability for intangible tax under s. 199.032 24 Yes No 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name HAI LIN, CHING 1660 U.S. 1 82 Street Address (P.O. Box Number is Not Acceptable) VERO BEACH FL 32960 83 84 Zip Code Çity 85 11. Pursual 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 gristered 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. Land familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATUR $z\sim \tau_{M}$ and or so, $z\sim \tau_{m}$ and of its general agricult and fill on applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. (96/6) (96/6) TELF DELETE 1.1 TITLE Change Addition HAI LIN. CHING 1.2 NAME NAMI 1660 U.S. 1 1.3 STREET ADDRESS STREET LADIORIESS VERO BEACH FL 32960 CEV State 1.4 City - St - ZIP DELETE Channe Addition THILE 2.1 THLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CPY St-ZF 2. 4 CITY-S1-ZIP DELETE Addition 3.1 TITLE 70113 3.2 NAME NAME STREET ACORESIS 33 STREET ADDRESS 34 C/TY-ST-ZIP Cabr S1 7P2 DELE TE THE 4 1 TITLE Change Addition 4 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CiTY-ST-ZIP CHTY ST 2H DELETE 5.1 TITLE Change Addition THEF 5.2 NAME NAME STREET ADORESS 5.3 STREET ADDRESS CCY ST ZP 5.4 CITY-ST-ZIP DELETE Change 101 F 6.1 TITLE ☐ Addition 6.2 NAME 6.3 STREET ADDRESS STREET AUCESS 64 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. Hurther 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

FILED
Feb 25 1997 8:00am
Secretary of State

