

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

97 OCT -9 PM 3:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000074456 (0)

1. Corporation Name

CODEGEN (USA), INC.



Principal Place of Business

7500 NW 41ST ST
MIAMI FL 33160

Mailing Address

7500 NW 41ST ST
MIAMI FL 33160

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/09/1996
3a. Date of Last Report

4. FEI Number 650693341
Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business

21 7500 NW 41ST ST
Suite, Apt. #, etc.

22 City & State
23 MIAMI

24 Zip 33160 25 Country U.S.A.

2a. Mailing Address

26 7500 NW 41ST ST
Suite, Apt. #, etc.

27 City & State

28 MIAMI

29 Zip 33160 30 Country U.S.A.

9. Name and Address of Current Registered Agent

SYGMAN, FORREST ESQ.
328 MINORCA AVENUE
CORAL GABLES FL 33134

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

PD WEN-FONG, LIAO
7500 NW 41ST ST
MIAMI FL 33160

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MANAGER
LEN-SHANG, SHYY
7500 NW 41ST STREET
MIAMI FL 33166

TITLE NAME STREET ADDRESS CITY-ST-ZIP

ACCOUNTING
CHIEH HUI, LIAO
7500 NW 41ST STREET
MIAMI FL 33166

TITLE NAME STREET ADDRESS CITY-ST-ZIP

MANAGER
DANIEL H. SILVA
7500 NW 41 STREET
MIAMI FL 33166

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE MANAGER ☐ Change ☒ Addition

1.2 NAME LEN-SHANG, SHYY

1.3 STREET ADDRESS 7500 NW 41 STREET

1.4 CITY-ST-ZIP MIAMI FL 33166

2.1 TITLE ACCOUNTING ☐ Change ☒ Addition

2.2 NAME CHIEH HUI, LIAO

2.3 STREET ADDRESS 7500 NW 41 STREET

2.4 CITY-ST-ZIP MIAMI FL 33166

3.1 TITLE MANAGER ☐ Change ☒ Addition

3.2 NAME DANIEL H. SILVA

3.3 STREET ADDRESS 7500 NW 41 STREET

3.4 CITY-ST-ZIP MIAMI FL 33166

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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.

CR2E034 (4/97)