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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000087603 (2)

CHARTER SUPREME (USA) INC.

Principal Place of Business

Mailing Address

1081 SW 101 TERRACE PEMBROKE PINES FL 33025 1081 SW 101 TERRACE PEMBROKE PINES FL 33025-3593 FILED
May 01 1997 8:00am
Secretary of State

- ! 10 0140 01 (18 18#10 04114 0814) 83(6)	. 89411 GB181 (81)1 18940 G111 69180 JAN 1981

PEMBROKE PIN	ES FL 33025	PEMBROKE PINES FL 33025	-3583		
•				3. Date Incorporated or Qualified 10/22/1996	3a. Date of Last Report
	ace of Business	2a. Mailing Address	24.00-	4. FEI Number	Applied For
21 213	1 N.W 79 AVE	26 D.O. BOX	260880	65-0706753	Not Applicable
Suite, Apt 22	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 MIA		City & State  28 DEN BROKE	OINES. FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Fip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032,
24 331	22 25 USA.	29 33026	30 USA.		Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	pistered Agent
	G, JENNIFER		81 Name		
1081	SW 101 TERRACE		82 Street Ad	dress (P.O. Box Number is Not Acceptab	le)
PEM	BROKE PINES FL 33025				
			83		
i.			84 City		EL 85 Zip Code
44 Pursuant	to the gravisions of Sections 607 0F.02	and 607 1509. Florida Statute	s the shove named or	orporation submits this statement for the p	, m-
i other or r	egistered agent, or both, in the State on familiar with, and accept the obligations.	d Florida. Such change was at	ithorized by the coroor	ation's board of directors. I hereby accep	t the appointment as registered
. Sign of Cloth	Signature, typed or printed name of registered agent	and toe if applicable (NOTE	Registered Agent signature rec	gulred when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	······ ·······························
TOTE	D	☐ DELETE	1.1 TITLE		Change Addition
MAME	KWOK, WAI YEE		1.2 NAME		
. STREET ADDRESS	UNIT 6&8, 18 FL, BLK E, 31-41		1.3 STREET ADDRESS		
CITY-\$1-2IF	FO TAN, SHATIN, NT HONG KO	)NG	1.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	sze, shuk yin		2.2 NAME		i
STREET ADDRESS UNIT 688, 18 FL, BLK E, 31-41 SHAN MEI ST.		2.3 STREET ADDRESS	•		
CI1Y+S1+Z0F	FO TAN, SHATIN, NT HONG KO	ING	2 4 CITY-ST-ZIP		;
THE		☐ DELETE	3 1 TITLE		Change Addition
NAME	-		32 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-7P			34. CITY-ST-ZIP		
TITLE		☐ DELETE	41 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		
-CITY - \$1 - 719			4.4 CITY-ST-ZIP		
THE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME	• .	
STREET ADDRESS			5.3 STREET ADORESS	•	
1				•	
CITY+S1+ZiF TillLE		☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
		- Otterie			, and some and some
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - 7(P	by could, that the information as sufficient	with thir filing done not evalid	6.4 City-St-ZiP	ted in Section 119 07(3)(i) Floride Statute	I further certify that the

4. 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:

SIGNATURE AND TYPES

YPED OF PRINTED OF SIGNING OFFICER OR

JENNIFER KUNG

4)23/9}

954) 432-1370 Daytine Phone "