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PROFIT CORPORATION ANNUAL REPORT

1999



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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90004 019 ***150.00

CHANG LONG INVESTMENT CORPORATION OF AMERICA	

Principal Place of Business Mailing Address 7712 HIDDEN IVY COURT 7712 HIDDEN IVY COURT ORLANDO FL 32819 ORLANDO FL 32819 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/27/1997 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 59-3420288 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certifcate of Status Desired Fee Required 27 22 City & State 6. Election Campaign Financing \$5,00 May Be City & State Added to Fees Trust Fund Contribution 28 23 Zip Country 8. This corporation owes the current year Intangible Zip Country □No Personal Property Tax. 30 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent HSUEH, TAI YU Street Address (P.O. Box Number is Not Acceptable) 7712 HIDDEN IVY COURT ORLANDO FL 32819 83 Zip Code 85 84 City 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. Elorida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Change DELETE 1.1 TITLE TITLE HSUEH, TAI YU 1.2 NAME 9110 BROOKLINE DRIVE 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32819 1.4 CITY-ST-ZIP CITY-ST-ZIF ☐ DELETE Change ☐ Addition 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4 3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition □ DELETE 51 TD F TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition 6.1 TITLE DELETE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 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, with all other like empowered.