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

. PROFFT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF ST Sandra B. Mogthawr

> Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000013980 (2)

TIME INTERNATIONAL (MIAMI) INC.

FILED Mar 12 1998 8:00am Secretary of State



Dringing! Diag	e of Pusiness	Adolton Address	<u> </u>			
Principal Place of Business Mailing Address						
6950 CYPRESS ROAD. #208-15 6950 CYPRESS ROAD, #20 PLANTATION FL 33317 PLANTATION FL 33317			ND, #208-15 N7	3-15		
TEMPRIEDIT CE GOOT		, 4-4,1111011 12 051			DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					02/10/1997	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number Applied For	
21		26			65-08/2427 Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc	t.		5. Certificate of Status Desired \$8.75 Additional	
City & State		27 City & State			Fee Required	
		City & State			6. Election Campaign Financing \$5.00 May Be	
Zip	Country	Zip Country		r\.	Trust Fund Contribution	
24	25	29	30	,	8. This corporation owes or has paid the current year Integrable Personal Property Tax due June 30. Yes No	
[27]	9. Name and Address of Curre				10. Name and Address of New Registered Agent	
WA	ING, MING C		8	1 Name		
6950 CYPRESS ROAD, #208-15			Ļ			
PLANTATION FL 33317			8	Street A	Address (P.O. Box Number is Not Acceptable)	
, ,			8	3	······································	
			_			
			8	4 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						
	Signification, typed or printed earlie of registered ag			gent signature r	required when reinstaling) DATE	
12.	OPP OPPORTS AT	ND DIRECTORS DELETI	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition	
NAME	LAM, CHI TO	Octo	1.2 NAMI	ĺ	Citalige Ci Rounion	
STREET ADDRESS	6950 CYPRESS ROAD, #208		T ADDRESS	ì		
CITY-ST-ZIP	PLANTATION FL 33317	, 10	i i	- 1		
TITLE	DST	DELETE	1.4 CITY-		Change Addition	
NAME	LAM, CHI CHAN		2.2 NAME			
STREET ADDRESS	6950 CYPRESS ROAD, #208	3-15		T ADDRESS		
CITY-ST-ZIP	PLANTATION FL 33317		2.4 CITY	[, (
TITLE		☐ DELETE			Change Addition	
NAME			3.2 NAME		COHGN. MARY	
STREET ADDRESS			3.3 STRE	T ADDRESS	6950 CYPRESS RD # 208-15	
CITY-ST-ZIP			3.4. CITY	J	COHEN, MARY 6950 CYPRESS RD # 208-15 PLANTATIONS, FL 333/7 Change Addition	
TITLE		DELETE			Change Addition	
NAME			4. 2 NAM	: '	′	
STREET ADDRESS			4.3 STREE	T ADDRESS	•	
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		DELETE			Change Addition	
NAME			5.2 NAME	ļ		
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		
TITLE		DELETE			Change Addition	
NAME			6.2 NAME		90002456129 Addition -03/13/9801009036	
STREET ADDRESS			6.3 STREE	T ADDRESS	***150.00	
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	^{πππ} 1 ⊃U• UU 3' \ '	
	146 - 1 - 1 - 1	total of the first of the same	117			

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.