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

PROFIT CORPORATION ANNUAL REPORT

1998

NAME STREET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000017482 (5)

	EN HSU, INC.				
Principal Plac	e of Business	Mailing Address			1 10011001 110 10111 10011 10111 00111 00111 00111 01011 10111 01011 01011 1101 1001
5391 34 STRI ST. PETERSE	EET BOUTH BURG FL 33711	6463 CENTRAL AVE. St. Petersburg FL 33	710		DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					02/25/1997
2. Principal P	Place of Business	2a. Mailing Address 26			4. FEI Number Applied For S 9 - 3480317 Not Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Regulred
City & Stat	9	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip 24	Country 25	Zip 29	Countr 30	у	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
	g. Name and Address of Currer	nt Registered Agent			10. Name and Address of New Registered Agent
	HELL, JAMES L		81	Name	
6461 CENTRAL AVE.			82	Street Add	dress (P.O. Box Number is Not Acceptable)
ST. PETERSBURG FL 33710			83	ļ	
			84		I-I
				1	FL 85 Zip Code
office or r agent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the oblig Signature, typed or proted name of registered age				progration submits this statement for the purpose of changing its registered atton's board of directors. I hereby accept the appointment as registered pured when reinstating) DA16
12	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE 1.1			Change Addition
NAME	HSU, KUO SEN		1.2 NAME		
STREET ADDRESS	6463 CENTRAL AVE. ST. PETERSBURG FL 33710		1.3 STREET ADDRESS		
CITY-ST-ZIP			1.4 CITY - 2.1 TITLE	SI-ZIP	Change Addition
NAME	AND A SECOND AND ADDRESS OF THE SECOND ASSESSMENT OF THE SECOND ASSESSM		2.2 NAME		
STREET ADDRESS	6463 CENTRAL AVE. 23			T ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL 33710 2.4		2. 4 CiTY-	ST - ZIP	
TITLE	DELETE 3.1		3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS				1 ADDRESS	
CITY-ST-ZIP TITLE			3.4. CITY- 4.1 TITLE	S1-ZIP	Change Addition
NAME		- Decree	4.1 HILE 4. 2 NAME		C., Orange C. Nubili
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP			4.4 CITY-:		
TITLE			5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS				I ADDRESS	
CITY-ST-ZIP		DELETE	5.4 CITY	ST-ZIP	Character T Mark

14. Thereby 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: __

63 STREET ADDRESS 6.4 CHY-ST-ZIP

FILED

Jan 20 1998 8:00am

Secretary of State