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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

P97000061700 (5)

FILED Feb 23 1998 8:00am Secretary of State

FU-SH/	AN, INC.			
Principal Plac	e of Business	Mailing Address		L INTERPRETATION POLICE CONTRACTOR AND
10139 HALLS RIVER ROAD 10139 HALLS RIVER ROAD HOMOSASSA FL 34446 HOMOSASSA FL 34446			ı	DO NOT WRITE IN THIS SPACE .
1				3. Date Incorporated or Qualified
				07/14/1997
2. Principal F	Place of Business	2a. Mailing Address		4 FFI Number Applied For
21		26		593447736 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	_	5 Cortificate of Status Decired \$8.75 Additional
22		27		Fee Required
City & Stat	е	City & State		6. Election Campaign Financing \$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution
24	25	— ·	io	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	9, Name and Address of Curre		<u> </u>	10. Name and Address of New Registered Agent
TIT	US, CLAIRE A		81 Nam	
	ORTH EAST THIRD STREET		60 0	and Address (D.O. Day Number in Net Assessable)
	YSTAL RIVER FL 34429		82 Stre	reet Address (P.O. Box Number is Not Acceptable)
} ```	10172 111211 12 07120		83	
			84 City	or 7in Code
			1 1 "	´ FLITI
11. Pursuant	to the provisions of Sections 607.05	i02 and 607.1508, Florida Statutes	, the above-nam	med corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
agent. I a	in familiar with, and accept the obli	gations of, Section 607.0505, Flori	thorized by the c da Statutes.	corporations board of directors. I hereby accept the appointment as registered
SIGNATURE				
	Signature, typed or printed name of registered a			nature required when reinstating) DATE
12. TITLE		ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	PTD WANG WITH CHILDIO		1.1 TITLE	CJ Change CJ Adollon
STREET ADDRESS	WANG, YUH-CHUNG 10139 HALLS RIVER ROAD		1.2 NAME	
	HOMOSASSA FL 34446		1.3 STREET ADDRES	
CITY-ST-ZIP TITLE	VPSD	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	☐ Change ☐ Addition
NAME	CHEN, CHAO-SHENG		2.2 NAME	
STREET ADDRESS	10139 HALLS RIVER ROAD		2.3 STREET ADDRES	IESS .
CITY-ST-ZIP	HOMOSASSA FL 34448		2. 4 CITY-ST-ZIP	
TITLE		☐ DÉLETE	3 1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRES	ESS
CITY-ST-ZIP			3.4. CITY-ST-ZIP	
TITLE		DELETÉ	4.1 TITLE	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRES	ESS
CITY-ST-ZIP		T NECEST	4.4 CITY - ST - ZIP	
TITLE		DELE te	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRES	
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	Change Addition
TITLE	· 	□ Deter	6.2 NAME	Colarge C Addition
NAME Street address			6.3 STREET ADDRES	ree
	•			200
CITY-ST-ZIP	at A a share to a second to a second to a	all the state of t	6.4 CITY-ST-ZIP	plated in Continue 110 07/2V/). Elevide Statutes I further partiful that the information

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 13 if chapter 607, or an attachment with an address.

ICHATURE Sup (hemy by gry 2/14/98 (352)5968968