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Jun 03 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # P97000075978
1. Corporation Name:

Seng Chow Corporation

Principal Place of Business: 14260 SW 57 Ln. #202 Miami, FL 33183
Mailing Address: 14260 SW 57 Ln. #202 Miami, FL 33183

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business: 21 State, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address: 26 State, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 09/2/92 4. FEET Number 65-0792784 5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution ☒ \$5.00 May Be Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No
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9. Name and Address of Current Registered Agent

Norma L. Seng
14260 SW 57 Lane #202
Miami, FL 33183

10. Name and Address of New Registered Agent

81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code	Same FL
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11. Pursuant to the provisions of Sections 607.06(2) and 607.15(8), Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent 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 agree to the provisions of Section 607.05(5), Florida Statutes.

SIGNATURE: [Signature] DATE: 5/22/98

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE: President NAME: Emilio D. Seng STREET ADDRESS: 14260 SW 57 Ln. #202 CITY-STATE-ZIP: Miami, FL 33183	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-STATE-ZIP
TITLE: Secretary NAME: Norma L. Seng STREET ADDRESS: 14260 SW 57 Ln. #202 CITY-STATE-ZIP: Miami, FL 33183	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-STATE-ZIP
TITLE: Treasurer NAME: Eddy A. Seng STREET ADDRESS: 14207 TownShire CITY-STATE-ZIP: Houston, TX 77077	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-STATE-ZIP
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-STATE-ZIP
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-STATE-ZIP
TITLE: _____ NAME: _____ STREET ADDRESS: _____ CITY-STATE-ZIP: _____	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-STATE-ZIP

14. I hereby certify that the information supplied was true and correct for the filing date. I further certify that the information included on this statement is true and correct 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 and that I am authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 of this report.

SIGNATURE: [Signature] Emilio Seng
DATE: 5/22/98 (305) 642-1070

CR2E034 (10/97)