## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



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

1996

DOCUM 1. Corporation I PEKIN		4 (6)					
Principal Place o	of Business	Mailing Address		] [[[0]]] [[0			II OKOLI OTOKI INSI
SUITE 217	ENDENT DRIVE LLE FL 32202	TWO INDEPENDENT DE SUITE 217 JACKSONVILLE FL 322		3. Date Incorporated or Qualified	3a. Dat	e of Last Re	•
				11/13/1990	]	05/01/19	<del>)</del> 95
. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number			upplied For
			on Street	59-3046323			lot Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc. 27 Sto 201		5. Certificate of Status Desired			Additional Required
City & State		27 Sto 201		6. Election Campaign Financing			May Be
Ony a State		28 Jacksonvill	p FL	Trust Fund Contribution			to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible t	ax under s	199.032,
L	25	1 - 1 - 0 - 0 - 1 - 1	30		□ No		
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New F	legistered	Agent	
			Name				
	HON, RICHARD SCOTT		82 Street Add	ress (P.O. Box Number is Not Acceptat	ole)		
	FORSYTH ST.		83				
STE 17							
JAUKS	ONVILLE FL 32202		<b>84</b> City		1=L	85 Zıçı	Code
or registere	o the provisions of Sections 607.0502 and agent, or both, in the State of Floridan, and accept the obligations of, Section	<ol> <li>Such change was authorized</li> </ol>	the above-named corpo by the corporation's boa	ration submits this statement for the pu ard of directors. I hereby accept the app	rpose o' ch ointmer t a	nanging its re s registered	egistered office agent. I am
S	Signature, typed or printed in he of ligistered ago it a		Registered Agent signature require		DATE	D DIDEOTO	DO 151 40
2,	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFF	IUERS AN	Change	Addition
LE	PD VCN PUNC BO	F" DEFEIG	1. 1 TITLE 12 NAME			Onlango	
ME	YEN, KUNG PO 2 INDEPENDENT DRIVE 217		1.3 STREET ADDRESS				
TREET ADDRESS TY-ST-ZIP	JACKSONVILLE FL		1.4 CITY - S1 - ZIP				
TLE	SD	☐ DELETE	2.11111.6			Change	☐ Addition
AME	YEN, KUNG TI	<u>—</u>	2.2 NAME				
TREET ADDRESS	2 INDEPENDENT DRIVE 217	•	2.3 STREET ADDRESS				
TY-ST-ZIP	JACKSONVILLE FL		2 4 CITY · ST - ZIP				
TLE	V	☐ DELETE	3. 1 TITLE			Change	☐ Addition
ME	yen, ju kuei		3.2 NAME				
TREET ADDRESS	2 INDEPENDENT DRIVE 217	•	3.3. STREET ADDRESS				
TY-ST-ZIP	JACKSONVILLE FL	[ ] DEVETE	3.4 CITY-ST-ZIP			Change	Addition
TLE	V VENT	☐ DELETE	4 1 THILE			C1 cuands	T VOOUINI
AME	JING-YI, YEN	•	4.2 NAME				
TREET ADDRESS	2 INDEPENDENT DRIVE 217 JACKSONVILLE FL		4.3 STREET ADDRESS				
TY-ST-ZIP	T	☐ DELETE	4.4 CITY-ST-2IP 5. 1 TITLE			Change	Addition
AME	SUNG, WEN-YING		5 2 NAME				_
REET ADDRESS	2 INDEPENDENT DRIVE 217	•	5.3 STREET ADDRESS				
TY-ST-ZIP	JACKSONVILLE FL		5.4 City - ST - ZiP				
TLE		DELETE	6.1 TITLE			Change	■ Addition
ME			6.2 NAME				
Treet address			6.3 STREET ADDRESS				
TY-ST-ZIP			6 4 CITY-ST-ZIP				
certify that oath; that I	the information indicated on this appu-	al report or supplemental annua ration or the receiver or trustee :	hed and does not qualify al report is true and accur empowered to execute the	for the exemption stated in Section 118 ate and that my signature shall have the ris report as required by Chapter 607, F	esame eo	ai eneci as i	rmade unde

SIGNATURE: KUNG-PO Yen 3/15/96 (9-4)363-6366