

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S42572** (5)

1. Corporation Name

TAO INTERNATIONAL TRADING, INC.



Principal Place of Business

**290 N.E. 59TH STREET
MIAMI FL 33137**

Mailing Address

**290 N.E. 59TH STREET
MIAMI FL 33137**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29

9. Name and Address of Current Registered Agent

**TAO, SHIN HWA
290 N.E. 59TH STREET
MIAMI FL 33137**

3. Date Incorporated or Qualified

04/03/1991

3a. Date of Last Report

04/25/1995

4. FEI Number

65-0257292

Applied For
Not Applicable

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 has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 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

Signature typed or printed name of registered agent or director

(If 10. Registered Agent signature required after filing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**PTD
TAO, SHIN HWA
7611 S.W. 142ND AVE.
MIAMI FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP
**VSD
TAO, JUDITH E.
7611 SW 142ND AVE
MIAMI FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

14 TITLE
15 NAME
16 STREET ADDRESS
17 CITY-STATE-ZIP

20 TITLE
21 NAME
22 STREET ADDRESS
23 CITY-STATE-ZIP

24 TITLE
25 NAME
26 STREET ADDRESS
27 CITY-STATE-ZIP

30 TITLE
31 NAME
32 STREET ADDRESS
33 CITY-STATE-ZIP

34 TITLE
35 NAME
36 STREET ADDRESS
37 CITY-STATE-ZIP

38 TITLE
39 NAME
40 STREET ADDRESS
41 CITY-STATE-ZIP

42 TITLE
43 NAME
44 STREET ADDRESS
45 CITY-STATE-ZIP

46 TITLE
47 NAME
48 STREET ADDRESS
49 CITY-STATE-ZIP

50 TITLE
51 NAME
52 STREET ADDRESS
53 CITY-STATE-ZIP

54 TITLE
55 NAME
56 STREET ADDRESS
57 CITY-STATE-ZIP

58 TITLE
59 NAME
60 STREET ADDRESS
61 CITY-STATE-ZIP

62 TITLE
63 NAME
64 STREET ADDRESS
65 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included 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:

SHEN HWA TAO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-20-96

Date

(305) 759-2507

Signature Phone

CR2E034 (12/95)