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

DOCUMENT # \$54907

(8)

Corporation Name

CATHAY HOUSE, INC.

41.75 - 4.11



Principal Place	or Brisiness	Maining Address								
2491 NW 10 CORAL SPR US	7 AVENUE INGS FL 33065	P.O. BOX 25583 FORT LAUDERDALE US	FORT LAUDERDALE FL 33320				415111111111111111111111111111111111111			
O O						3. Date Incorporated or Qualified 05/22/1991	3a. Date	of Last)4/25/		
2. Principal Place of Business 21 5/49 N.W. 74AV 26						4. FEI Number 65-0264419	4		Applied For Not Applicable	
Suite, Apt. #	etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			75 Additional B Required	
City & State 23	<i>III</i> 1	City & State	Dity & State			Election Campaign Financing Trust Fund Contribution	ing \$5.00 May Be Added to Fees			
zip ノンリンフリ	26 Country 25 USA	Zip 29	Zip Country 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes				
	9. Name and Address of Current F	Registered Agent				10. Name and Address of New R	gistered /	tgent		
			81	N	Vame					
CHENG, TSAI FANG 2491 N.W. 107 AVE.				<u> </u>	treet Addres	Address (P.O. Box Number is Not Acceptable)				
CORAL	SPRINGS FL 33065		83							
			84	C	Dity		FL	85	Zip Code	
dd Diwayant t	the provisions of Sections 607.0502 a	nd 607 1508 Florida Statut	tes, the above	l	ned cornora	tion submits this statement for the our	onse of cha	Auging it	s registered office	
or registers	o the provisions of Sections 607,0502 and agent, or both, in the State of Florida. In, and accept the obligations of, Section	. Such change was auth orb	zed by the com	ora	tion's board	d of directors. I hereby accept the appo	intment as	register	ed agent. Fam	
SIGNATURE _	Signature, typed or printed name of registered agont and	d Hie if applicatio (N	Ö1E: Registered Age	nt s g	gnature required		DATE			
12.	OFFICERS AND I	DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI				
TITLE	D	☐ DELETE	1. 1 TITLE				L] Chang	e 🔲 Addition	
NAME	CHENG, RUEY HSIUNG		1.2 NAME							
STREET ADDRESS	2491 N.W. 107TH AVENUE CORAL SPRINGS FL		1,3 STREE		ļ					
CHY-ST-ZIP	D D D D D D D D D D D D D D D D D D D	[] DELETE	1.4 CITY - 5 2. 1 TITLE		<u>IP</u>			Chang	e [] Addition	
TITLE	CHENG, TSAI FANG	[]] DETE 11	2. T 111LC 2.2 NAMÉ		i		٠ ,	,		
NAME STREET ADORESS	2419 N.W. 107TH AVENUE		2.3 STREE		DRESS					
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NAME			3.2 NAME							
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CITY - ST - ZIP			3.4 CITY-		1P			7 Chano	e	
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NAME			4.2 NAME		DDECC					
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STREET ADDRESS			5.3 STREE		ORESS					
CITY-SI-ZIP			5.4 CITY-							
TITLE		DELETE	6 1 TITLE					Chang	ge 🔲 Addition	
NAME			6.2 NAME		ļ					
STREET ADDRESS			6.3 STREE	1 ADI	DRESS					
CITY-ST-ZIP			6.4 CITY-	S1- <i>1</i>	iiP				t to I fullor	
						at the second to Constant 440				

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 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 certify 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

SKINATURE TO TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Cheng

7/36/96 Gos

(305)5945735 Daylinic Prone #