CORPOR ANNUAL	RATION REPORT		FLORIDA DEPAF Sandra E	RTMENT OF STA 3. Mortham ry of State	<b>ATE</b>	AND FILED 1996 OCT 30 AN 10:		
OCUME Corporation Name	NT # S 64	789	Amend	eđ		SECRETARY OF STA	(IDA	
Taiwa	an Trade Ce	enter,	Inc.			50000195	92225- 0106000 25 ******61	163 13 - 25
Principal Place of Bu	usiness	•	failing Address			**************************************	CO 4-4-4-4-07	E Burrow
7500 N.W Miami, F	. 41 st. 1. 33166		7500 N.W. MIami, Fl			Date Incorporated or Qualified     FEI Number	Sa. Date of Last Repo	ort
2. Principal Place o	of Business	<u> </u>	Mailing Address			65-0270440	No	t Applicable
1 Suite, Apt. #, etc	c.	26	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 A	
2,		27	City & State			6. Election Campaign Financing	\$5.00 Added t	
City & State		28		Country		8. This compration has liability for inte	angible tax under s. 1	
Zip	Country 25	29	Zip	30		Florida Statutes Yes  10. Name and Address of New Reg	LJNo	
9	). Name and Address	of Current Reg	Istered Agent	81	Name	IV. Name and reasons		
N Pursuant to the	Philip Youn 7500 N.W. 4 Miami, Fla.	1 St. 33166	607.1508, Florida Stati	82 83 84 stes, the above- tred by the corr	City	dress (P.O. Box Number is Not Acceptable)  poration submits this statement for the purpoerd of directors. I hereby accept the appoint	Fi 85 Zip	Code gistered office agent. I am
11. Pursuant to the or registered familiar with,	7500 N.W. 4 Miami, Fla.  The provisions of Sections agent, or both, in the Stand accept the obligation	1 St. 33166 607.0502 and ate of Florida. Sens of, Section 6		83 84 stes, the above- ized by the corps.	City -named corporation's b	poration submits this statement for the purposerd of directors. I hereby accept the appoi	FL 85 Zip ose of changing its re ntment as registered in	gistered office agent. I am
11. Pursuant to the or registered familiar with, and SIGNATURE	7500 N.W. 4 Miami, Fla.  he provisions of Sections agent, or both, in the Stand accept the obligation centre based or protect name of m	1 St. 33166 607.0502 and ate of Florida. Set of, Section 6	te if applicable. (	83 84 Res, the above- ized by the corp iss.  NOTE: Registered Apr	City -named corporation's bo	poration submits this statement for the purposer of directors. I hereby accept the appoint the appoint of the submit appointment of the submit appoi	FL 85 Zip ose of changing its re ntment as registered in	gistered office agent. I am
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SHORING OFFICE OR DIRECTOR

418-4949