FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Apr 15 1997 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS **DOCUMENT # \$77028** (6)CHINA STAR, INC. Mailing Address Principal Place of Business 6507 W WATERS AVE 6507 W WATERS AVE UNIT 6-7-6-9 UNIT 6-7-8-9 TAMPA FL 33634-2283 TAMPA FL 33634-2283 3. Date incorporated or Qualified 3a. Date of Last Report 08/29/1991 03/12/1996 2. Principal Place of Business 2s. Mailing Address 4. FEI Number Applied For 59-3108039 21 26 Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be Election Campaign Financing Trust Fund Contribution 23 Added to Fees Ζιρ Country This corporation has liability for intangible tax under s. 199.032, 24 29 Florida Statutes Yes No 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name ATTI, JOHN L 13584 49TH STREET NORTH 82 Street Address (P.O. Box Number is Not Acceptable) SUITE A **CLEAREWATER FL 34622** 83 84 City 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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Siprature Typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when rainstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. 96/6) PD DELETE 11 TITLE Change Tillia CHIU, YU-JEN NAME 1.2 NAME 6829 SWAIN AVENUE STREET ADORESS 1.3 STREET ADDRESS TAMPA FL CITY-ST-ZiP 1.4 City - ST - ZIP DELETE Addition Change 1811 F 2.1 TITLE CHIU. YEN-PIN 2.2 NAME NAME 6829 SWAIN AVENUE STREET ADDRESS 2.3 STREET ADDRESS TAMPA FL CHY+S1-ZIP 2.4 CiTY-ST-ZiP DELETE Addition THLE 3.1 TITLE Change 3.2 NAME STREET ADDRESS 33 STREET ADDRESS CHY-ST-ZIE 3.4. CITY-\$T-ZIP DELETE Change Addition THEE 4.1 TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP City - \$1 - 7/9 101.8 DELETE 5.1 TIYLE Change ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST ZIP 5.4 CITY-ST-ZIP DELETE Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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.

6.3 STREET ADDRESS

6.4 City-St-7IP

6.1 TITL€ 6.2 NAME

SIGNATURE:

TITLE

STREET ADDRESS

CITY ST-ZIP

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Change

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