


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

FILED  
May 07 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # S82410 (9) 1. Corporation Name ASIAN CENTURY INVESTMENT GROUP, INC.		

Principal Place of Business 2898 UNIVERSITY DR SUITE 17 CORAL SPRINGS FL 33065 US	Mailing Address 2898 UNIVERSITY DR SUITE 17 CORAL SPRINGS FL 33065-1429 US
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2. Principal Place of Business 21 152 NE 167th ST Suite, Apt. #, etc. 22 #111 City & State 23 NORTH MIAMI BEACH Zip 24 33162 Country 25 DADE	2a. Mailing Address 26 11133 N.W. 2nd CT Suite, Apt. #, etc. 27 City & State 28 CORAL SPRINGS FL Zip 29 33071 Country 30 BROWARD
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9. Name and Address of Current Registered Agent CHANG, THERESA C.J. 2898 UNIVERSITY DR STE 7 CORAL SPRINGS FL 33065	10. Name and Address of New Registered Agent 81 Name CHANG, THERESA C.J. 82 Street Address (P.O. Box Number is Not Acceptable) 11133 N.W. 2nd CT 83 84 City CORAL SPRINGS FL 85 Zip Code 33071
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHANG, THERESA C.J. 2898 UNIVERSITY DR #7 CORAL SPRINGS FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	D CHANG, THERESA C.J. 11133 N.W. 2nd COURT CORAL SPRINGS FL
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	

14. I 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.

SIGNATURE: \_\_\_\_\_

CR2E034 (10/97)