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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** May 05, 1999 8:00 am Secretary of State

05-05-1999 90090 043 \*\*\*150.00

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1. Corporation Name

ASIAN CENTURY INVESTMENT GROUP, INC.

|                                   |  |   |                        |              |  |           | E BUBUL BEBLE LOBE |
|-----------------------------------|--|---|------------------------|--------------|--|-----------|--------------------|
| Principal Place                   | e of Business  | Mailing Address                           |                        |              |  |           |                    |
| 152 NE 167TH                      | STREET   | 11133 NW BND COURT                        |                        |              |  |           |                    |
| #11<br>NORTH MIAMI BEACH FL 33162 |  | CORAL SPRINGS FL 33071<br>US              | CORAL SPRINGS FL 33071 |              | DO NOT WRITE IN THIS SE                          | ACE       |                    |
| US                                | BEACH PL 33162   | 03  |                        |              | 3. Date Incorporated or Qualifed                 |           |                    |
| 00                                |  |   |                        |              | 09/23/1991                                       |           | ţ                  |
| 2 Principal Pl                    | ace of Business  | 2a. Mailing Address                       |                        |              | 4. FEI Number                                    |           | Applied For        |
| ¬ ·                               | ace of business  | 26 11133 NW 2nd                           | Co                     | urt          | 65-0286321                                       | 1         | Not Applicable     |
| Suite, Apt.                       | # etc  | Suite, Apt. #, etc.                       |                        | _            |  | \$8.75    | Additional         |
| 22                                | m, 610.  | 27  |                        |              | 5. Certificate of Status Desired                 | •         | Required           |
| City & State                      | Р  |   |                        |              | 6. Election Campaign Financing                   | \$5.0     | May Be             |
| 23                                | •  | City & State Coral Springs                | 3,                     | Fl           | Trust Fund Contribution                          |           | to Fees            |
| Zip                               | Country  |   | ountry                 | 7            | 8. This corporation owes the current year Intang | <br>jible |                    |
| 24                                | 25   | Zip C<br>29 33071 30                      |                        |              |  | Yes       | □No                |
|                                   | 9. Name and Address of Curr  |   |                        |              | 10. Name and Address of New Registered Ag        | ent       |                    |
|                                   |  |   | 81                     | Name         |  |           | ł                  |
| CHA                               | nge, theresa c   |   | 82                     | Stroot Ad    | Idress (P.O. Box Number is Not Acceptable)       |           |                    |
|                                   | 3 NW 2ND COURT   |   | 02                     | Sireer Au    | diess (F.O. Box (4difficer is Not Acceptable)    |           |                    |
| COR                               | AL SPRINGS FL 33071  |   | 83                     | <del> </del> |  |           |                    |
|                                   |  |   | -                      |              |  | - T 7:    | Codo               |
|                                   |  |   | 84                     | City         | FL   | 85 Zip    | Code               |
| SIGNATURE                         | m familiar with, and accept the oblining status, typed or printed name of registered | igations of, Section 607.0505, Florida St |                        |              | uired when reinstating) DATE                     |           |                    |
| 12.                               | <del></del>  | AND DIRECTORS 1                           |                        |              | ADDITIONS/CHANGES TO OFFICERS AND                | DIRECT    | TORS IN 12         |
| TITLE                             | D  |   | TITLE                  |              |  | Change    |                    |
| NAME                              | CHANG, THERESA C.J.  | 1.2                                       | NAME                   |              | Chang, Theresa C.                                |           |                    |
| STREET ADDRESS                    | 11133 NW 2ND COURT   | 1.3                                       | STREE                  | T ADDRESS    | 11133 NW 2nd Court 33071                         |           |                    |
| CITY-ST-ZIP                       | CORAL SPRINGS FL   |   | CITY-S                 |              | Corai Springs, FI 33071                          |           |                    |
| TITLE                             | 00/11/2 0/1  |   | TITLE                  | <u>~</u>     |  | Change    | Addition           |
| NAME                              |  | 22  | NAME                   |              |  |           |                    |
| STREET ADDRESS                    |  |   |                        | T ADDRESS    |  |           |                    |
| CITY-ST-ZIP                       |  | 1   | 4 CITY-                | i            |  |           |                    |
| TITLÉ                             |  |   | TITLE                  |              |  | Change    | e 🔲 Addition       |
| NAME                              | -  | 33  | NAME                   |              |  |           | ł                  |
| STREET ADDRESS                    |  | 3.3                                       | STREE                  | TADDRESS     |  |           |                    |
| CITY-ST-ZIP                       |  | 34  | . CITY-:               | ST-ZIP       |  |           |                    |
| TITLE                             |  | 633                                       | TITLE                  |              |  | Change    | e 🔲 Addition       |
| NAME                              |  | 4.  | 2 NAME                 | .            |  |           |                    |
| STREET ADDRESS                    |  | 1   |                        | T ADDRESS    |  |           | •                  |
| 1                                 |  |   | CITY-S                 |              |  |           | j                  |
| CITY-ST-ZIP<br>TITLE              |  |   | TITLE                  |              | [  | Chang     | e Addition         |
| NAME                              |  |   | 2 NAME                 |              |  |           |                    |
| STREET ADDRESS                    |  | 5.3                                       | STREE                  | TADDRESS     |  |           |                    |
| CITY-ST-ZIP                       |  | 5.4                                       | CITY-S                 | ST-ZIP       |  |           | j                  |
| TITLE                             |  |   | TITLE                  |              |  | Change    | e 🔲 Addition       |
| NAME                              |  |   | 2 NAME                 |              |  |           | Ī                  |
| STREET ADDRESS                    |  | 6.3                                       | STREE                  | T ADDRESS    |  |           |                    |
|                                   |  |   |                        |              |  |           |                    |

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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