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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 01, 1999 8:00 am Secretary of State **Katherine Harris**

04-01-1999 90081 006 ***150.00

1. Corporation							
CHERAD	E TRADING CORP.						
Principal Place	of Business	Mailing Address			\$ 000 014000 1001 0101 00010 010	'It Bidii didii didii di	6 11 B(811 1881
8323 NW 68-ST 8323 JUN 68 ST.							
MIAMI FL 33166 US US					DO NOT WRITE IN TH	IS SPACE	
		7-03			3. Date Incorporated or Qualifed	_	
					02/14/1992		
Principal Place of Business 2a. Mailing Address					4. FEI Number	<u> </u>	lied For
21 46 15 1	123.7	26 4615 NW 7	a A	VE#101	65-0312101		Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired	\$8.75 A	
27 M Q M L 27 M A W 1 City & State City & State					6. Election Campaign Financing	\$5.00	·
23 3 1 16		28 33/66	0)/	rve	Trust Fund Contribution	Added to	
Zip - C	Country	Zip	Cou	ntry	8. This corporation owes the current year	Intangible	
24	25	29	30		Personal Property Tax.		□No
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Register	ed Agent	
70.0				81 Name			
TSUI, KAI CHEUN				82 Street Addre	ess (P.O. Box Number is Not Acceptable)		_
8323 N.W. 68 ST. MIAMI FL 33166							
MIAN	WI FL 33 100			83			
1	·		i	84 City		85 Zip C	ode
44 5	- th	and 607 1509 Florida Statute	e the a	nove-pamed corn	estion submits this statement for the nurness	of changing its r	registered
-45-4-05-5	naistered agent or both in the State o	if Florida. Such change was at	ithonzed	ny the cornoratio	on's board of directors. I hereby accept the ap	pointment as reg	istered
agent. I ai	m familiar with, and accept the obligati	ons of, Section 607.0505, Flor	ida Stati	ites.			
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered	Agent signature required	d when reinstating) DATE) .
12.	OFFICERS ANI		13.		ADDITIONS/CHANGES TO OFFICERS		
TITLE	D DELETE 1.1 TI		'LE		☐ Change	☐ Addition	
NAME	TSUI, KAI CHEUN 12N		ME			Į.	
STREET ADDRESS	8323 N.W. 68 ST.		REET ADDRESS				
CITY-ST-ZIP_	MIAMI FL			TY-ST-ZIP		Change	Addition
TITLE	D	☐ DELETE	2.1 Π			☐ Criange	☐ Addition }
NAME	TWING, TEACH TEL		2.2 NA				į
STREET ADDRESS	0020 (1.11. 00 01.		REET ADDRESS				
CITY-ST-ZIP	MIAMI FL 2.40 □ DELETE 3.1 TI		TY-ST-ZIP		Change	Addition	
TITLE			3.2 NA				_
NAME STREET ADDRESS				REET ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP			}
TITLE		☐ DELETE	4.1 TF			☐ Change	☐ Addition
NAME			4. 2 N				
STREET ADDRESS			4.3 ST	REET ADDRESS			1
CITY-ST-ZIP			4.4 CI	TY-ST-ZIP			
TITLE		☐ DELETE	5.1 TC	TLE .	· ——	☐ Change	Addition
NAME			5.2 NA				}
STREET ADDRESS	`			REET ADDRESS			
C/TY-ST-ZIP				TY-ST-ZIP			CT Address
TITLE		☐ DELETE	6.1 TI			☐ Change	Addition
NAME	(, , , (, ,		6.2 N/				
STREET ADDRESS	Company Comp		6.3 S	REET 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.

SIGNATURE:

593-0888