**FILED** 

Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90088 029 \*\*\*150.00

## 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

## **DOCUMENT #**

1. Corporation Name

	OF Rusiness								
Principal Place of Business Mailing Address									
1855 NE 163 ST 3092 NW 15 ST N MIAMI BEACH FL 33162 MIAMI FL 33125									
US						DO NOT WRI	DO NOT WRITE IN THIS SPACE		
•						<ol><li>Date Incorporated or Qualifed</li></ol>			
ı					_	02/25/1992			
2. Principal P	lace of Business	2a. Mailin	g Address			4, FEI Number	L	Applied For	
21		26				65-0309549		Not Applicable	
Suite, Apt.	#, etc	Suite,	Apt. #, etc			5. Certificate of Status Desired	i i	.75 Additional	
22		27						ee Required	
City & State	9	City 8	State			6. Election Campaign Financing		5.00 May Be	
23		28				Trust Fund Contribution	A	dded to Fees	
Zip	Country	Zip		Countr	У	This corporation owes the curr			
24	25	29		30		Personal Property Tax.	☐ Ye		
	9. Name and Address of Cu	rent Registered A	Agent		d N	10. Name and Address of New F	registered Agent		
DAM	OLUNG HONT			8	1 Name				
PAN, QUING HONT				8:	2 Street Add	ress (P.O. Box Number is Not Accepta	able)		
1221 NORTH DR NORTH MIAMI BEACH FL 33179								<del></del>	
NON	TH MIAMI DEAGH FC 33179			8.	3				
				8	4 City		<b></b> 85	Zip Code	
						poration submits this statement for the	FL [° ]		
agent. I a	m familiar with, and accept the ob-	ligations of, Sectio	n 607.0505. Flo	rida Statute	s.	on's board of directors. I hereby acce	DATE		
12.	OFFICERS	AND DIRECTOR		13.		ADDITIONS/CHANGES TO OF			
TITLE	P		☐ DELETE	11TITLE				hange 🗌 Addition	
NAME	PENG, CHEN CHUNG			1.2 NAME					
STREET ADDRESS	3092 NW 15 ST			13STRE	ET ADDRESS				
CITY-ST-ZIP	MIAMI FL	_		14 CITY-	ST-ZIP				
TITLE	CP		DELETE	2 1 TITLE			□ Ct	hange	
NAME	PAN, CHONG			2.2 NAME					
STREET ADDRESS	3092 NW 15 ST			23 STRE	ET ADDRESS				
CITY-ST-ZIP	MIAMI FL			2 4 CITY				hange	
TITLE	T		☐ DELETE	3:TITLE			☐ Ct	lange [_] Addition	
NAME	PAN, QUING HONT			3.2 NAME					
STREET ADDRESS	1221 NORTH DR			33 STRE	ET ADDRESS				
CITY-ST-ZIP	n miami beach fl			3.4 CITY	-ST-ZIP				
TITLE	S		□ DELETE	4 1 TITLE				hange	
NAME	PAN, QUING YUK			4 2 NAMi	Ę				
STREET ADDRESS	7946 EAST DR #305			43 STRE	ET ADDRESS				
CITY-ST-ZIP	N BAY VILLAGE FL			44 CITY-	ST-ZIP				
TITLE			☐ DELETE	5 1 TITLE			[] ¢i	hange	
NAME				5 2 NAME					
STREET ADDRESS				53STRE	ET ADDRESS				
CITY-ST-ZIP				54 CITY-					
TITLE			☐ DELETE	6:TITLE	ĺ		□ Ct	hange 📋 Addition	

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.

6.2 NAME

6 3 STREET ADORESS

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP