SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

STREET ADDRESS

CITY-ST-ZIP

FILED Aug 31 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT # V18833** (6)HO'S ENTERPRISES, INC. Principal Place of Business Mailing Address 7970 NW 56 STREET 7970 NW 56 STREET MIAMI FL 33166 MIAMI FL 33166 DO NOT WRITE IN THIS 6PACE 3. Date Incorporated or Qualified 03/05/1992 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0317740 21 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No 24 25 29 30 Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent HO, MAN FEI 81 7970 NW 56 STREET 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33166** 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. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) CR2E034 (5/98) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 TITLE __] DELETE Change Addition HO, MAN FEI NAME 1.2 NAME **7970 NW 56 STREET** STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL 33166 1.4 CITY-ST-ZIP CITY-ST-ZIP 2.1 TITLE TITLE DELETE Change Addition CHAN, MARIA IVAN NAME 2.2 NAME **7970 NW 56 STREET** STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33166** CITY-ST-ZIP 2.4 CITY-ST-ZIP 3.1 TITLE TITLE DELETE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP TITLE DELETE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE ___ Change ____ Addition 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 6.1 TITLE ___ DELETE **500**0026300**7**0 -09/01/98--01038--046 NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this tiling 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 suppliemental 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 of 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 again attachment with an address.

***150.00

8/21/58

August 21, 1998

Secretary of State Division of Corporation P.O. Box 6327 Tallahassee, FL 32314

Ref:Ho's Enterprises, Inc., Doc. No. V18833 Annual Report Year 1998

Dear Sir/Madam:

Per your instructions on our telephone conversation. I herein enclose a check in the amount of \$150.00 and our Annual Report. We never received your first notice in the mail. Please, adjust your records accordingly.

Respectfully yours,

Maria F Ho. President