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

**PROFIT** CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

**FILED** Apr 14 1998 8:00am Secretary of State

FORTU	NE DRAGON II, INC.					<u>.</u> 				
Principal Plac	e of Business	Mailing Address			<del></del>	-{	A BIDAL TABLE	OLOLI DIRLI <b>1</b> 18	ir <b>Bia</b> ll ( <b>50</b> )	
7178 NORTH UNIVERSITY DRIVE WOODMONT SOUARE TAMARAC FL 33321 US		7178 NORTH UNIVERSITY DRIVE WOODMONT SQUARE TAMARAC FL 33321 US			DO NOT WRITE IN THIS SPACE					
, <sup>08</sup>		US				3. Date Incorporated or Qualified 07/06/1992				1
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number			pplied For	┨
21		<del>                                     </del>	26			65-0353634		Not Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.							Additional	1
22		27				5. Certificate of Status Desired			equired	_
City & Stat	е	City & State				6. Election Campaign Financing	_		May Be	
23		28				Trust Fund Contribution			to Fees	⇃
Zip				ınıry		8. This corporation owes or has pa				1
24	25 29 30  9. Name and Address of Current Registered Agent			1		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent				
PUN, DAI CHUN					Name			<u> </u>		1
7178 N. UNIVERSITY DR.				-	Charact Addres	as (D.O. Bay Mysshar in Net Angestale	NA.			1
	MARAC FL 33321			82	Street Addre	ss (P.O. Box Number is Not Acceptab	лө)			
]				63						1
ĺ				84	City			<b>85</b> Zip	Code	┨
l				<u> </u>	-		FL			
11. Pursuant	to the provisions of Sections 607.050	2 and 607 1508, Florida Statu	les, the at	bove-r	named corpo	pration submits this statement for the pon's board of directors. I hereby accep	ourpose of	changing i	ts registered	1
agent. i a	am familiar with, and accept the oblig	ations of, Section 607,0505, FI	orida Stat	tutes.	no corporatio	or a board of officerors. Thereby accep	ու ա ա ա ա ա	Ontinoni as	rogistorou	1
SIGNATURE										
12.	Signature, typed or printed name of registered age OFFICERS AN		E Registered	d Agent	signature required	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE	DIRECTO	DS IN 12	48
TITLE	D	DELETE	1.1 III	TLE		ADDITIONS/CHANGES TO OFFIC	ZEIIO AIVE	Change	Addition	1001
NAME	PUN, KAI CHUN		1.2 No							1
STREET ADDRESS	7178 N. UNIVERSITY DR.		- 1	1.3 STREET ADDRESS 1.4 CITY-ST-ZIP						3
CITY-ST-ZIP	TAMARAC FL		14 CI							Š
TITLE		DELETE	2.1 Tr	TLE				Change	Addition	70
NAME			2.2 NA	2.2 NAME 2.3 Street address						ŀ
STREET ADDRESS			2.3 ST							
CITY-ST-ZIP				2.4 CITY-ST-ZIP		<u></u>	1.64	<del></del>		1
TITLE		DELETE	3.1 Tr		1			☐ Change	☐ Addition	
NAME			3.2 NA		nnncco					
STREET ADDRESS			1	REET AD						
CITY-ST-ZIP TITLE	3.4. C		(1Y-ST-	LIP			Change	Addition	1	
NAME			4. 2 N							
STREET ADDRESS				REET AC	DORESS					ì
CITY-ST-ZIP				TY-ST-						
TITLE		DELETE		5.1 TITLE				Change	Addition	1
NAME			5.2 NA	5.2 NAME						ļ
STREET ADDRESS			53 ST	REET AD	DORESS					
CITY-ST-ZIP				TY-ST-2	į.					]
TITLE		☐ DELETE	6.1 177	TLE				Change	Addition	1
NAME			6.2 NA	ME						1
STREET ADDRESS			6.3 ST	REET AD	ODMESS					1
CITY-ST-ZIP				TY-ST-						1
						Section 119 07(3)(i) Florida Statutes I				

indicated on this annual report or supplied with this little does not quality 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:**