FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 3:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **V55724** **(1)**

1. Corporation Name
ORIENT QUARTET, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
~~% KTG&S REGISTERED AGENT CORPORATION~~ ~~1401 BRICKELL AVE SUITE 700~~ ~~MIAMI FL 33131~~	~~% KTG&S REGISTERED AGENT CORPORATION~~ ~~1401 BRICKELL AVE SUITE 700~~ ~~MIAMI FL 33131~~

3. Date Incorporated or Qualified: **07/31/1992**
3a. Date of Last Report: **01/24/1994**

2. Principal Place of Business	2a. Mailing Address
21 3176 COMMODORE PLAZA	26 3176 COMMODORE PLAZA
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: MIAMI, FL	28 City & State: MIAMI, FL
24 Zip: 33133 25 Country	29 Zip: 33133 30 Country

4. FEI Number: **65-0348910** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~KTG&S REGISTERED AGENT CORPORATION~~ ~~1401 BRICKELL AVE~~ ~~SUITE 700~~ ~~MIAMI FL 33131~~	81 Name: CATHERINA CHU 82 Street Address (P.O. Box Number is Not Acceptable): 18180 SW 83 AVE 83 84 City: MIAMI FL 85 Zip Code: 33157

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: [signature] 4/26/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	11 TITLE		☐ Change ☐ Addition
NAME	CHU, RAYMOND L	12 NAME		
STREET ADDRESS	18180 SW 83 AVE.	13 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33133	14 CITY-ST-ZIP	MIAMI, FL, 33157	
TITLE	VD	21 TITLE		☒ Change ☐ Addition
NAME	DOUST, DAVID	22 NAME	NO LONGER W/ CORPORATION	
STREET ADDRESS	6940 SW 56 CT.	23 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33155	24 CITY-ST-ZIP		
TITLE	SD	31 TITLE	VP/S/T/D	☐ Change ☒ Addition
NAME	CHU, CATHERINA	32 NAME	CHU, CATHERINA	
STREET ADDRESS	18180 SW 83 AVE.	33 STREET ADDRESS	18180 SW 83 AVE	
CITY-ST-ZIP	MIAMI FL 33133	34 CITY-ST-ZIP	MIAMI, FL 33157	
TITLE	TD	41 TITLE		☒ Change ☐ Addition
NAME	DOUST, ABBY	42 NAME	NO LONGER W/ CORPORATION	
STREET ADDRESS	6940 SW 56 CT.	43 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33155	44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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.

SIGNATURE: [signature] 4/26/95 529-9998
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0130808 CP