FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCU 1. Corporation	MENT	# V7293 9	9 (4)					
,	•	IS CORPORATION	· /					
							<u> </u>	
Principal Place of Business Mailing Address					···	(1881) QIARI (BURA 11918 FAIRD AIR	18 1911 B1811 B1811 B1911 B18	
10321 SW MIAMI FL : US	121 STREET 33176		MIAMI FL 33176					
03			บร			3. Date Incorporated or Qualified	3a. Date of Last f	
2. Principal F	Place of Busin	iess	2a. Mailing Address			10/20/1992 4. FEI Number	04/13/18	
21		······	26		65-0426299		Applied For Not Applicable	
Suite, Apt	. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.7	5 Additional
City & Sta	te		City & State					Required
23			28			Election Campaign Financing Trust Fund Contribution		0 May Be
Zφ	- · · · · · · · · · · · · · · · · · · ·		Zip Country		8. This corporation has liability for i		d to Fees	
24	O Nome	and Address of Current I	29 30			Florida Statutes 🔲 Yes 🔟 No		
· · · · · · · · · · · · · · · · · · ·	9. Manie	and Address of Current	registered Agent	81	Name	10. Name and Address of New R	egistered Agent	
CHEN	CHINEAN	J		82				
CHEN, CHUN-FAN 17005 SOUTH DIXIE HIGHWAY					Street Add	dress (P.O. Box Number is Not Acceptab	le)	
	FL 33157	WE TROUBLE		83				
				84	City			
	-	·			' '			p Code
11. Pursuant or registe	to the provisi red agent, or	ons of Sections 607,0502 ar both, in the State of Florida.	nd 607.1508, Florida Statu Such change was authori	tes, the above-	named corpo	oration submits this statement for the purpard of directors. I hereby accept the appo	pose of changing its	registered office
	ith, and acce	pt the obligations of, Section	607.0505, Florida Statute	S.	Oracion's boe	во от опессота, тивгеру ассерс (не аррс	intment as registered	l agent. I am
SIGNATURE	Signature, typed	or printed name of registered agent and	tille if goolicable Ava	OTE: Registered Ager				
12.	OFFICERS AND DIRECTORS			13.	it signature require	ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTO	NES IN 12
THILE	D		☐ DELETE	1. 1 TITLE		7 - 2 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	Change	Addition
NAME		CHUN-FAN		1.2 NAME			_ ,	
STREET ADDRESS	10021 011 12101 011/221		1.3 STREET ADDRESS					
CITY-S1-ZIP TITLE	MIAMI	-L	E) briefe	14 CITY-S	T-ZIP	**************************************		
NAME	D CHEN, MIN-MEI		☐ DELETE	2 1 TITLE			Change	Addition
STREET ADDRESS		SW 121ST STREET		2.2 NAME	1Dboroo			
C(1) Y - ST - ZIP				2.3 STREET 2.4 CITY - S				1
TITLE			☐ DELETE	3 1 TITLE	1-217		; Change	Addition
NAME				32 NAME			, La orange	
STHEET ADDRESS	1			3.3 STREET	ADDRESS			
Crity-ST-ZIP	ļ			3.4 CITY-S	r-ziP			
NAME			☐ DELETE	4. 1 TITLE			Change	Addition
STREET ADDRESS				4.2 NAME				
CITY-ST-ZIP				43 STREET				ļ
TITLE	 		DELETE	4.4 C(TY-S) 5. 1 TITLE	- ZIP		Change	
NAME				5.2 NAME			Change	☐ Addition
STREET ADDRESS				5.3 STREET	ADDRESS			
CITY - ST - ZIP				5.4 CITY - ST				
TITLE]		DELETE	6 1 TITLE			Change	Addition
NAME				6.2 NAME	ĺ			_ '
STREET ADDRESS				6.3 STREET	ADDRESS			
14. Ldo hereby	v certify that t	he information supplied with	this filing in valuate it.	6.4 CITY-ST	- ZIP	or the exemption stated in Section 119.0		
	s coming trical t	no information supplied with	u vo thing is voluntarily furn	isned and does	not qualify for	or the exemption stated in Section 119 0	7/31/k/ Florida Statute	e I further

certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/54/91

(305) 252-0660 (265) 26 Daytime Phone #