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Apr 04, 2006 8:00 am
Secretary of State

03-02-2006 90007 020 ***150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J53424

1. Entity Name
KUMQUAT TREE, INCORPORATED

66008472

01312006 Chg-P CR2E034 (11/05)

Principal Place of Business	Mailing Address
3005 W. LAKE MARY BLVD SUITE 108 LAKE MARY, FL 32746	3005 W. LAKE MARY BLVD SUITE 108 LAKE MARY, FL 32746

2. Principal Place of Business	3. Mailing Address
346 Rockwell Cr.	346 Rockwell Cr.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Lake Mary	City & State: Lake Mary. FL
Zip: FL 32746 Country: U.S.A.	Zip: 32746 Country: USA.

4. FEI Number: 59-2762931 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

LAU, KWOK YU
3005 W. LAKE MARY BLVD., STE 108
LAKE MARY, FL 32746

7. Name and Address of New Registered Agent

Name: LAU, KWOK YU
Street Address (P.O. Box Number is Not Acceptable): 346 Rockwell Cr.
City: Lake Mary FL Zip Code: 32746

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Kwok Yu [signature] 1/31/06

Typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee will be $550.00

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LAU, KWOK YU 346 ROCKWELL CIR. LAKE MARY, FL 32746 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST LAU, PUI MEI 348 ROCKWELL CIR. LAKE MARY, FL 32746 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kwok Yu [signature] 1/31/06

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #