


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 16, 2004 8:00 am
Secretary of State

07-16-2004 90001 039 ****61.25

DOCUMENT # N94000005205

1. Entity Name
THE CHINESE ASSOCIATION OF SCIENCE, ECONOMICS, AND CULTURE OF SOUTH FLORIDA, INC. (CASEC)



Principal Place of Business
7763 ROCKPORT CIRCLE LAKE WORTH, FL 33467 US

Mailing Address
7763 ROCKPORT CIRCLE LAKE WORTH, FL 33467 US

44048962



2. Principal Place of Business
252 SAN REMO DR

3. Mailing Address
252 SAN REMO DR

Suite, Apt. #, etc.

07122004 Chg-NP CR2E037 (10/03)

City & State
JUPITER FL

City & State
JUPITER FL

Zip
33458 Country
USA

Zip
33458 Country
USA

4. FEI Number
65-0535764

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

CHEN, ZHENGUAN
7763 ROCKPORT CIRCLE LAKE WORTH, FL 33467

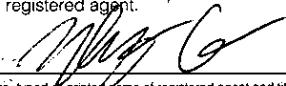
7. Name and Address of New Registered Agent

Name
CHEN, ZHENQUAN

Street Address (P.O. Box Number is Not Acceptable)
252 SAN REMO DR

City
JUPITER FL Zip Code
33458

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:  DATE: **7/13/04**

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

Filing Fee is \$61.25 Due by September 8, 2004

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

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	VD	<input type="checkbox"/> Delete
NAME	DING, MINGZHOU	
STREET ADDRESS	6340 COUNTRY FAIR CIR	
CITY-ST-ZIP	BOYNTON BEACH, FL	
TITLE	PD	<input type="checkbox"/> Delete
NAME	XU, RENLIANG	
STREET ADDRESS	13084 NW 13TH ST	
CITY-ST-ZIP	PEMBROKE PINES, FL 33028	
TITLE	C	<input type="checkbox"/> Delete
NAME	YAN, JASON	
STREET ADDRESS	15920 LISBON CT	
CITY-ST-ZIP	WELLINGTON, FL 33414	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WU, JIE	
STREET ADDRESS	DEPT OF COMPUTER SCIENCE, FAU	
CITY-ST-ZIP	WELLINGTON, FL 33431	
TITLE	TD	<input type="checkbox"/> Delete
NAME	CHEN, ZHENQUAN	
STREET ADDRESS	7763 ROCKPORT CIR	<i>Address Changed see Right</i>
CITY-ST-ZIP	LAKE WORTH, FL 33467	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TD
CHEN, ZHENQUAN Change Addition
252 SAN REMO DR, JUPITER, FL 33458

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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:  DATE: **7/13/04**

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