

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2004 8:00 am
Secretary of State

03-12-2004 90045 002 ***150.00



DOCUMENT # P99000025645

1. Entity Name
AMERICAN HERB GROUP, INC.

Principal Place of Business Mailing Address
7971 SW 40TH ST., SPACE 15 MIAMI FL 33155

2. Principal Place of Business **7069 SW 46 street**
 3. Mailing Address **7069 SW 46 street**



MOORE CR2E034 (11/03)

City & State **Miami** City & State **Miami**
 Zip **FL** Country **33155** Zip **FL** Country **33155**

4. FEI Number **65-0907795** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
HONG, ZHONG
7971 SW 40TH ST., SPACE 15
MIAMI FL 33155

7. Name and Address of New Registered Agent
 Name **ZHANG, FANG FANG**
 Street Address (P.O. Box Number is Not Acceptable)
7069 SW 46 ST
 City **Miami** FL Zip Code **33155**

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 **ZHANG, FANG FANG (PD)** *Fas Fas Jky* **02/20/04**
Signature, 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, 2004 Fee will be \$550.00
Make Check Payable to Florida Department of State

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	PD HONG, ZHONG 7971 SW 40ST #15 MIAMI FL 33155 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZHANG, FANG FANG 7069 SW 46 street MIAMI, FL 33155 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ZHANG, YING YING 7069 SW 46 street MIAMI, FL 33155 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HONG, ZHONG 7069 SW 46 street MIAMI, FL 33155 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ZHANG, YING CHEN 7069 SW 46 street MIAMI, FL 33155 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR HONG, WENTIE 7069 SW 46 street MIAMI, FL 33155 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 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: **ZHANG, FANG FANG** *Fas Fas Jky* **02/20/04**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #