2007 FOR PROFIT CORPORATION

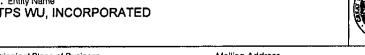
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6. Name and Address of Current Registered Agent

ANNUAL REPORT DOCUMENT # S49967 1. Entity Name TPS WU, INCORPORATED Malling Address Principal Place of Business



FILED Apr 23, 2007 08:00 Al Secretary of State



12730 NEW BRITTANY 12730 NEW BRITTANY #434 #434

FORT MYERS, FL 33907

FORT MYERS, FL 33907

US



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No Chg-P

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CR2E034 (11/05)

4.	FEI Number	 	Applied For
	65-0305361		Not Applicable
5.	Certificate of Status Desired	\$8.75	Additional

Fee Required

WHITNEY, JAMES W 3045 ESTERO BLVD. **SUITE 434**

L DO NOT WRITE IN THIS SPACE FT. MYERS BCH, FL 33931

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

10.

Signature, typed or printed name of registered agent and title if applicable.

OFFICERS AND DIRECTORS

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

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NAME	SHUI KWAI LAW, TERESA	
STREET ADDRESS	2471 AVONGATE DRIVE	
CITY-ST-ZIP	MISSISSAUGA, ONT CAN,	
TITLE	VD	
NAME	NGAN PENG WU, SALLY	
STREET ADDRESS	2471 AVONGATE DRIVE	
CITY-ST-ZIP	MISSISSAUGA, ONT CAN,	
TITLE	STD	
NAME	LAI TAK WU, PETER	
STREET ADDRESS	2471 AVONGATE DRIVE	
CITY-ST-ZIP	MISSISSAUGA, ONT CAN,	DO NOT WRITE
TITLE		IN THIS SPACE
NAME		
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45		ACTORISMENT OF CONTRACTOR DESIGNATION OF THE PROPERTY OF THE P

12. I hereby certify that the information supplied with this filling 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 amendoress, with all other like empowered.

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR