2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 246614

1. Entity Name
THE CHONG CORPORATION

FILED
Apr 30, 2007 08:00 AM
Secretary of State

Principal Place of Business

3820 W. NAVY BLVD. PENSACOLA, FL 32507 Mailing Address

3820 W. NAVY BLVD. PENSACOLA, FL 32507



DO NOT WRITE IN THIS SPACE

04212007	No Chg-P	CR2E034 (1	1/05)
4. FEI Number			Applied For
59-0969	888	ĺ	Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALEX YU, P.A. 238 E. DAVIS BLVD., SUITE 310 TAMPA, FL 33606

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this statement for the pions of registered agent.	urpose of changing its registere	ed office or r	egistered agent, or bo	oth, in the State of Florida I am familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title in	f applicable. (NOTE Registered	Agent signature	required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		Election Campaign Finance Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS			<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LIN, FENGJUAN 3820 W NAVY BLVD PENSACOLA, FL 32507				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LING. FENGJUAN 3820 W NAVY BLVD PENSACOLA, FL 32507				U00000748959 05/18/07-80004-007 150.00
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			! !	IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

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 an address, with all other like empowered.

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SIGNATURE AND THEE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dale

Daytime Phone #