2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 13, 2007 8:00 am Secretary of State **DOCUMENT # 641574**-1. Entity Name 02-13-2007 90014 030 ***158.75 HONG KONG INTERNATIONAL, INC. Mailing Address Principal Place of Business HONG KONG REST 10720 W. FLAGER 10720 WEST FLAGLER MIAMI FL 33174 **MIAMI FL 33174** 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suito, Apt. #, etc. 1st MOORE CR2E034 (10/06) Applied For City & State 4. FEI Number City & State 59-2011643 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CHONG, ANTONIO Street Address (P.O. Box Number is Not Acceptable) 10720 WEST FLAGLER STREET SWEETWATER FL 33174 Zip Code 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 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 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11111 Delete HILL Addition CHONG, ANTONIO NAMI NAM 5638 NW 104TH CT STREET ADDRESS STREET ADDRESS MIAMI FL CHY ST-ZIP CITY ST AP VICE PRESIDEM n Addition RHE TITLE ☐ Change Detete AURA L-CHOR CHONG, ANTONIO NAM NAME 5638 NW 104TH CT 12981 SW 2751 STREET ADDRESS STREET ADDRESS MIAMI FL CHY-SI-ZIP CHY-SE-ZIE ☐ Change Addition THE Delete CUAN, MANUEL CHONG J 1105 SW 87TH AVE STREET ADDRESS STREET ADDRESS MIAMI FL CHY ST-ZIP CHY-SL-ZIP Change ☐ Addition ☐ Delete 100 NAMI NAMI STREET LADDRESS STREET ADDRESS CHY ST-7IP CHY ST 7/P ☐ Change Addition Delete DIB 11114 NAMI NAME STREET ADDRESS SHREET ADDRESS CITY-ST-7IP CHY-S1-74P Change Addition ☐ Delete HUE HHE NAME NAME STREET ADDRESS STREET ADDRESS CHY-SI-7IP 12. I horeby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED