2004 LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A03000001678

Entity Name: HOUSE OF FIVE DRAGONS, LTD

FILED Aug 19, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

610 FOREST DRIVE

CASSELBERRY, FL 32707 US

Current Mailing Address: New Mailing Address:

610 FOREST DRIVE

CASSELBERRY, FL 32707 US

FEI Number: 52-2418817 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORNELL, RICHARD A 610 FOREST DRIVE

CASSELBERRY, FL 32707 US

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.

SIGNATURE:

Electronic Signature of Registered Agent Date

Capital Contributions as Shown on record: 2,000.00

Amount of Capital Contributions in Florida to date: 0.00

GENERAL PARTNER INFORMATION: ADDRESS CHANGES ONLY:

Document #:

Name: CORNELL, RICHARD A

 Address:
 610 FOREST DRIVE
 Address:

 City-St-Zip:
 CASSELBERRY, FL 32707 US
 City-St-Zip:

Document #:

Name: TSAI, PING-YEH

 Address:
 610 FOREST DRIVE
 Address:

 City-St-Zip:
 CASSELBERRY, FL 32707 US
 City-St-Zip:

Document #:

Name: TAO, YEDONG

 Address:
 610 FOREST DRIVE
 Address:

 City-St-Zip:
 CASSELBERRY, FL 32707 US
 City-St-Zip:

Document #:

Name: BOLLET, ROBERT

 Address:
 4820 HALL ROAD
 Address:

 City-St-Zip:
 ORLANDO, FL 32817 US
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: RICHARD A. CORNELL DR. 08/19/2004