## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000000359

Entity Name: KYE INTERNATIONAL CORP

FILED Apr 13, 2005 Secretary of State

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Current P	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
12675 COI CHINO, C	LONY STREET A 91710					
Current M	lailing Addres	s:	New Mail	New Mailing Address:		
8400 NW 25TH STREET, SUITE 110 MIAMI, FL 33122			127	1301 NW 84 AVENUE 127 MIAMI, FL 33126		
FEI Number	: 33-0446831	FEI Number Applied For ( )	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and	l Address o	f New Registered Agent:	
LIN, CHI-Y 10359 NW MIAMI, FL	45 LANE					
	named entity s e of Florida.	submits this statement for the	purpose of changing	its registered	d office or registered agent, or both,	
SIGNATUI	RE:					
	Electron	ic Signature of Registered Ag	ent		Date	
Election Car	mpaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CHEN, SONG-Y	SONG-KAO RD., SHIN YI DIST.	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	LU, TZE-PIN(PE 8331	Delete TER) MONGA, CA 91739	Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	SD () YANG, JENNIFE 17560 PAGE C YORBA LINDA,	DURT	Title: Name: Address: City-St-Zip:	PD YANG, JENN 17560 PAGE YORBA LINI		
Title: Name: Address: City-St-Zip:	MD () LIN, CHI YU 10359 NW 45TI MIAMI, FL 331:		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	

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 or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LIN, CHI YU MD 04/13/2005