

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2007 8:00 am
Secretary of State

04-09-2007 90055 038 ***150.00

40053137



04042007 Chg-P CR2E034 (2/06)

4. FEI Number **59-2212344** Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☐ \$8.75 Additional Fee required

6. Name and Address of Current Registered Agent

YANG, WILLIAM WEI
3102 E CERVANTES ST
PENSACOLA, FL 32503

7. Name and Address of New Registered Agent

Name **YANG, WILLIAM WEI**
Street Address (P.O. Box Number is Not Acceptable)
3103 E STRONG ST.
City **PENSACOLA** FL **32503**

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 *Chen Wen Hsiang* (NOT: Registered Agent signature required when reinstating)

DATE **4/4/07**

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

10. OFFICERS AND DIRECTORS

TITLE	P D	<input checked="" type="checkbox"/> Delete
NAME	YANG, WEI WILLIAM	
STREET ADDRESS	3102 E. CERVANTES ST.	
CITY-ST-ZIP	PENSACOLA, FL	
TITLE	STD	<input checked="" type="checkbox"/> Delete
NAME	YANG, CHEN WEN HSIANG	
STREET ADDRESS	3102 E CERVANTES ST	
CITY-ST-ZIP	PENSACOLA, FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YANG, WEI WILLIAM	
STREET ADDRESS	3103 E STRONG ST.	
CITY-ST-ZIP	PENSACOLA, FL 32503	
TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YANG, CHEN WEN HSIANG	
STREET ADDRESS	3103 E STRONG ST.	
CITY-ST-ZIP	PENSACOLA, FL 32503	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing 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.

SIGNATURE: *Chen Wen Hsiang*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date **4/3/07**

Daytime Phone # **(850) 432-7899**