2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 11, 2005 8:00 am Secretary of State

DOCUMENT # F97000005597 1. Entity Name BENQ AMERICA CORP.						04-11-2005 90153 044 ***150.00					
Principal Plac	e of Business	Mailing Address	• • • • • • • • • • • • • • • • • • • •	1, , _			5 4				
53 DISCOVERY IRVINE, CA 92618 US		53 DISCOVERY									
IKVINE, CA	92618 US	IRVINE, CA 92618	US								
Principal Place of Business 3.		3. Mailing Address									
C the Area than the		Cobs. Ass. 4					KILI I isa li maih maka main	i Baili Baigi	BALBY BRID IBIII		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				03222005	Chg-P	CR2E	034 (10/0	3)	
City & State		City & State				4. FEI Number 77-0467	157		-	Applied For Not Applicable	
Zip	Country	Zip Coun		ntry	5. Certificate				\$8.75	Additional	
	6. Name and Address of Current Re	egistered Agent	<u> </u>	1					Fee Requ	uired	
				Name	7. Name and Address of New Registered Agent						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD				Street Address (P.O. Box Number is Not Acceptable)							
PLANTATION, FL 33324						<u></u>					
	ί.			City					Zip C	Code	
8. The above named entity submits this statement for the purpose of changing its regist				ed office or r	registere	F⊾∣					
	tions of registered agent.	no parpose or origing no	109.0101	ca omee or t	registero	a agent, or both,	in the State of No	rida. Tar	T ICHIHINGA YYI	iiii, and accept	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renatating) DATE											
	Signature, typed or printed name of registered agent and	title if applicable. (NOTI	E: Hegistere	d Agent signature	e required w	men reinstating)		DATE			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Fina Trust Fund Contribution				ncing	\$5.0 Added	00 May Be d to Fees					
10.	OFFICERS AND DI		11.	- 1		ADDITIONS/C	HANGES TO OFFI	CERS AN			
TITLE NAME	WANG, JERRY	Delete	TITLI						☐ Chang	ge	
STREET ADDRESS	157 SHAN YING ROAD			EET ADDRESS							
CITY-ST-ZIP	KWEISHAN, TAOYUAN, TAIWAN,	☐ Delete	TITL	'-ST-ZIP	<u> </u>				☐ Chang	ge 🔲 Addition	
NAME	LEE, SHEAFFER	□ Delete	NAM						TT OURIN	de 🗀 vanition	
STREET ADDRESS CITY-ST-ZIP	157 SHAN YING ROAD KWEISHAN, TAOYUAN, TAIWAN,			EET ADDRESS '-ST-ZIP							
TITLE	S	☐ Delete	TITL		S				∑ Chang	ge 🔲 Addition	
NAME	LEE, ELLIN		NAM	SE .		, Ellin			Cag onung	,	
STREET ADDRESS CITY-ST-ZIP	20480 E BUSINESS PARKWAY CITY OF INDUSTRY, CA 91789			EET ADDRESS '-ST-ZIP			ry, Irvi	ne,	CA 9	2618	
TITLE	PD PD	☐ Delete	TITLI		PD				Chang	ge	
NAME	TANG, RALPH		NAM	1E		g, Ralp	h		<u> </u>	,,	
STREET ADDRESS CITY-ST-ZIP	20480 E BUSINESS PARKWAY CITY OF INDUSTRY, CA 91789			EET ADDRESS '-ST-ZIP	53	Discove	ry, Irvi	ine,	CA 9	2618	
TITLE		☐ Delete	TITL	E					☐ Chang	ge 🔲 Addition	
NAME STORES ADDRESS			NAM								
STREET ADDRESS CITY-ST-ZIP				EET ADDRESS '- ST- ZIP							
TITLE		· Delete	TITL						☐ Chang	ge Addition	
NAME STREET ADDRESS			NAM STRE	EET ADDRESS							
CITY-ST-ZIP				-ST-ZIP							
12. I hereby	certify that the information supplied with the	nis filing does not qualify for	r the exe	mption state	ed in Sec	tion 119.07(3)(i),	Florida Statutes. I	further c	ertify that th	e 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 of 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 pther like empowered. Ellin Lee,

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED SAME OF SIGNING OFFICER OR DIRECTOR