


2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # F97000005597 1. Entity Name BENQ AMERICA CORP.					
Principal Place of Business 53 DISCOVERY IRVINE, CA 92618 US			Mailing Address 53 DISCOVERY IRVINE, CA 92618 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 77-0467457	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small>					
Amended AR is \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D WANG, JERRY 157 SHAN YING ROAD KWEISHAN, TAOYUAN, TAIWAN.	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center;"> 000063000320 01/06/06--01046--001 **26.25 </div>	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D LEE, SHEAFFER 157 SHAN YING ROAD KWEISHAN, TAOYUAN, TAIWAN.	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center;"> 11/29/05--01036--018 **35.00 000063000320 </div>	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	S LEE, ELLIN 53 DISCOVERY IRVINE, CA 92618	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	PD TANG, RALPH 53 DISCOVERY IRVINE, CA 92618	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Ben Chu 53 Discovery Irvine, CA, 92618	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	D Tang, Ralph 53 Discovery Irvine, CA, 92618	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Ben Chu 53 Discovery Irvine, CA, 92618	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY- ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: 12-30-2005 949.255.6510 <small>Date Daytime Phone #</small>		

FILED
05 DEC 30 PM 2:56
TALLAHASSEE, FLORIDA



12022005 Chg-P CR2E034 (10/03)

J. Roberts JAN 06 2006