

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 04, 2005 8:00 am**  
**Secretary of State**

02-28-2005 90049 026 \*\*\*\*50.00  
04-04-2005 90422 003 \*\*\*\*50.00

60046348



03302005 Chg-LLC CR2E083 (10/03)

<b>DOCUMENT # L04000047653</b>					
<b>1. Entity Name</b> YANG'S HOLDING, LLC.					
<b>Principal Place of Business</b> 4252 US HWY 98 LAKELAND, FL 33809 US			<b>Mailing Address</b> 4252 US HWY 98 LAKELAND, FL 33809 US		
<b>2. Principal Place of Business</b> 7373 Hunters Green CR Suite, Apt. #, etc.		<b>3. Mailing Address</b> 7373 Hunters Green CR Suite, Apt. #, etc.			
<b>City &amp; State</b> Lakeland, FL		<b>City &amp; State</b> Lakeland, FL		<b>4. FEI Number</b> 20-1378214	
<b>Zip</b> 33810		<b>Country</b> U.S.A		<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$5.00 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  YANG, LI HUI 4252 US HWY 98 LAKELAND, FL 33809			<b>7. Name and Address of New Registered Agent</b> Name: Yang, Li Hui Street Address (P.O. Box Number is Not Acceptable): 7373 Hunters Green Cr. City: Lakeland FL Zip Code: 33810		
<b>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.</b>					
SIGNATURE: <u>[Signature]</u> (NOTE: Registered Agent signature required when reinstating) DATE: _____					
<b>Filing Fee is \$50.00 Due by May 1, 2005</b>			<b>Make check payable to Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM YANG, TU GUANG 4252 US HWY 98 LAKELAND, FL 33809 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	7373 Hunters Green Cr. Lakeland, FL 33810 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM YANG, LI HUI 4252 US HWY 98 LAKELAND, FL 33809 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	7373 Hunters Green Cr. Lakeland, FL 33810 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
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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	
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	
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	
<b>11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.</b>					
<b>SIGNATURE:</b> <u>[Signature]</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE					
Date				Daytime Phone #	