

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000047363

FILED
Jun 16, 2009
Secretary of State

Entity Name: MAITAI ONE COMPANY, LLC.

Current Principal Place of Business:

7710 APPLE TREE CIR
ORLANDO, FL 32819 US

New Principal Place of Business:

Current Mailing Address:

7710 APPLE TREE CIR
ORLANDO, FL 32819 US

New Mailing Address:

FEI Number: 20-8965353 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

MAI, SHAO FANG
7710 APPLE TREE CIR
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

MAI, SUNG YEN
7710 APPLE TREE CIR
ORLANDO, FL 32819 US

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.

SIGNATURE: SUNG YEN MAI

06/16/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: MAI, SUNG YEN
Address: 7710 APPLE TREE CIR
City-St-Zip: ORLANDO, FL 32819 US

Title: MGRM () Delete
Name: SHEI MAI, LIN CHIN
Address: 7710 APPLE TREE CIR
City-St-Zip: ORLANDO, FL 32819 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change () Addition
Name: MAI, LIN CHIN SHEI
Address: 7710 APPLE TREE CIR
City-St-Zip: ORLANDO, FL 32819 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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.

SIGNATURE: SUNG YEN MAI

MR.

06/16/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date