

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000096659

FILED
Sep 11, 2009
Secretary of State

Entity Name: SHIN TIEN LUCK THROUGH, LLC.

Current Principal Place of Business:

1132 ELDERBERRY DRIVE
DAVENPORT, FL 33897

New Principal Place of Business:

Current Mailing Address:

1132 ELDERBERRY DRIVE
DAVENPORT, FL 33897

New Mailing Address:

FEI Number: 26-2180131 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:

Name and Address of New Registered Agent:

YANG, MING-HSIU
1132 ELDERBERRY DRIVE
DAVENPORT, FL 33897 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: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: YANG, YI-HE
Address: 1132 ELDERBERRY DRIVE
City-St-Zip: DAVENPORT, FL 33897

Title: MGR () Delete
Name: LAN, YUEH-LI
Address: 1132 ELDERBERRY DRIVE
City-St-Zip: DAVENPORT, FL 33897

Title: MGR () Delete
Name: YANG, MING-HSIU
Address: 1132 ELDERBERRY DRIVE
City-St-Zip: DAVENPORT, FL 33897

ADDITIONS/CHANGES:

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

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

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

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: MING-HSIU YANG

MGR

09/11/2009

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