

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000069158

FILED  
Apr 05, 2011  
Secretary of State

Entity Name: FUZHOU LI CHENG HANDICRAFT USA, LLC

## Current Principal Place of Business:

4205 GLENMOOR DR.  
WEST PALM BEACH, FL 33409

## New Principal Place of Business:

3521 VILLAGE BLVD  
APT#203  
WEST PALM BEACH, FL 33409

## Current Mailing Address:

4205 GLENMOOR DR.  
WEST PALM BEACH, FL 33409

## New Mailing Address:

3521 VILLAGE BLVD  
APT#203  
WEST PALM BEACH, FL 33409

FEI Number: 27-0809464

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LIN, XIAOLI  
4205 GLENMOOR DR.  
WEST PALM BEACH, FL 33409 US

## Name and Address of New Registered Agent:

LIN, XIAOLI  
3521 VILLAGE BLVD  
APT#203  
WEST PALM BEACH, FL 33409 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:

04/05/2011

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR  
Name: CHEN, XUEQIANG  
Address: 3521 VILLAGE BLVD., APT#203  
City-St-Zip: WEST PALM BEACH, FL 33409

Title: MGRM  
Name: LIN, JINWU  
Address: YANGXIA VILLAGE XIANGQIAN  
City-St-Zip: MINHOU COUNTY, FUJIAN, P.R.C, FJ 350112 CH

Title: MGR  
Name: HUANG, YONGHUI  
Address: YANGXIA VILLAGE XIANGQIAN  
City-St-Zip: MINHOU COUNTY, FUJIAN, P.R.C, FJ 350112 CH

Title: MGRM  
Name: LIN, XIAOLI  
Address: 3521 VILLAGE BLVD., APT#203  
City-St-Zip: WEST PALM BEACH, FL 33409

I hereby 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: XIAOLI LIN

RA

04/05/2011

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