## **FILED** Jan 22, 2007 8:00 am Secretary of State

2007	ANNUAL REPORT	13

1. Entity Nam	CORPORATON				01	-22-2007 9010	7 049 *	**158.75		
Principal Place 35475 DUME SUITE A NEWARK, CA	BARTON CT.	Mailing Address PO BOX 7598 FREMONT, CA 94537	US	··.	4 U		1 210M 210M D	1817 83811 83817 818	(JES) H 188)	
2. Principal Place of Business - No P.O. Box # 32760 MONIO LAKE LANE		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01172007	Chg-P	CR2E	034 (12/06)		
City & State FREMONT CA		City & State			4. FEI Numbe 94-2928			No	pplied For ot Applicable	
zip 94 <u>4</u>	Country  ALAMEDA	Zip	Country		L	of Status Desired	Ø	\$8.75 Add Fee Require		
	6. Name and Address of Current F	Registered Agent		ame	7. Name and	Address of New R	egistered	Agent		
TSAI, JAMES T 402 13TH AVE N					ddress (P.O. Box Number is Not Acceptable)					
#A JACKSON	VILLE BEACH, FL 32250									
			Ci	ity			FI	Zip Cod	e	
	named entity submits this statement for ions of registered agent.	the purpose of changing its r	egistered of	ffice or register	ed agent, or both	h, in the State of Flo	orida. I an	n familiar with,	and accept	
SIGNATURE_	· · · · · · · · · · · · · · · · · · ·									
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agei	nt signature required	when reinstating)		DATE			
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0	9. Election Campaig Trust Fund Contri			00 May Be ed to Fees					
10.	OFFICERS AND I	DIRECTORS	11.		ADDITIONS/	CHANGES TO OFF	ICERS AN	D DIRECTOR	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TSAI, JAMES T. 32760 MONO LAKE LANE FREMONT, CA 94555	☐ Delete	TITLE NAME STREET ADI CITY-ST-Z	. 1				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TSAI, NANCY LIN 32760 MONO LAKE LANE FREMONT, CA 94555	☐ Delete	TITLE NAME STREET ADI	t				☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO BIANCO, MICHAEL F 1420 OAK RIM DR. HILLSBOROUGH, CA 94010	<b>⊠</b> Daidte	TITLE NAME STREET ADI CITY-ST-Z	1				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHUNG, RAY T 34506 MILBURN TER. FREMONT, CA 94555	<b>⊠</b> Delete	TITLE NAME STREET ADI CITY-ST-Z	ORESS 327	D 1, Coni 760 Mor mout. C	nie E no Lake 1 A 9455	hane 5	Change	<b>⊠</b> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADI CITY-ST-Z	DRESS				Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET AD CITY-ST-Z	ļ.				Change	☐ Addition	
indicated of the co	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo or on an attachment with an address, v	true and accurate and that movered to execute this report a	v signature	shall have the s	same legal effect	t as if made under o	oath: that	l am an officer	r or director	