2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 24, 2007 08:00 A Secretary of State

	KEF OK I	
DOCUMENT # M70053 1. Entity Name U.S. TAIWAN ENTERPRISES, INC.		
Principal Place of Business	Mailing Address	
4121 W. VINE ST. HWY 192	4121 W. VINE ST. HWY 192	

KISSIMMEE, FL 34741 US



DO NOT WRITE IN THIS SPACE

04162007 No Chg-P CR2E034 (11/05)

4. FEI Number			Applied For
59-2974433			Not Applicable
5. Certificate of Status Desired	X	\$8.75	Additional

6. Name and Address of Current Registered Agent

Lames C.

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LEE, JAMES C. 4121 W VINE ST HWY 192 KISSIMMEE, FL 34741

SIGNATURE:

KISSIMMEE, FL 34741 US

DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the pui ions of registered agent.	rpose of changing its registered	d office or re	egistered agent, or bo	oth, in the State of Florida. I am familia	ar with, and accept
Vollage	(1)	Θ_{a}			4/20/07	•
SIGNATURE.	Signature, typed or printed name of registered agent and title if	applicable, (NOTE: Registered	Agent signature	required when reinstating)	BATE	<u></u>
FIL After Ma	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	sing X	\$5.00 May Be Added to Fees	U00000729059 05/08/07~80019=028	163.75
10.	OFFICERS AND DIRECT	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD LEE, JAMES C. 4121 W VINE ST HWY 192 KISSIMMEE, FL 34741			·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD LEE, ANNA S. 4121 W VINE ST HWY 192 KISSIMMEE, FL 34741					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN ⁻	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			٠.			
12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes: I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an oddress, with all other-like empowered.						