


File on or before May 1, 1999 or Limited Liability Company will be subject to a \$ 400.00 LATE FEE.

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| LIMITED LIABILITY COMPANY ANNUAL REPORT 1999 |  | FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS |
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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| FILING FEE \$ 188.75 | Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE |
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| 1. Name and Mailing Address of Limited Liability Company LIREN ENTERPRISE, LLC 736 AVENIDA QUINTA #101 CLERMONT FL 34711 | DOCUMENT # M97000000291 94-AR CM |
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| 1a. Principal Place of Business Address 4905 TENNYSON CT KISSIMMEE FL 34746 |
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| 2. Principal Place of Business Suite, Apt. #, etc. City & State Zip | 2a. Mailing Address 736 Avenida Quinta Suite, Apt. #, etc. #101 City & State Clermont, FL Zip 34711 |
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| 3. Date Organized or Qualified 05/22/1997 | 3a. State of Formation DE |
| 4. FEI Number 59-3433056 | <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable |
| 5. Date of Last Report 04/17/1998 | 6. Certificate of Status Desired \$8.75 Additional Fee Required <input type="checkbox"/> |

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| 7. Name and Address of Current Registered Agent SHENGZHONG, WEI 736 AVENIDA QUINTA #101 CLERMONT FL 34711 |
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| 8. Name and Address of New Registered Agent/Office Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City FL Zip Code |
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9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when new agent.)

| 10. Title | Managing Members/Managers | Business Street Address | City, State and Zip Code |
|-----------|---------------------------|-------------------------|--------------------------|
| MGR | ZHONG, WEI SHENG | 736 AVENIDA QUINTA #101 | CLERMONT FL |
| MGR | HUANG, SIFANG | 4905 TENNYSON CT | KISSIMMEE FL |
| MGR | HOU, SHAN-HU | 736 AVENIDA QUINTA #101 | CLERMONT FL |
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| 11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my 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, and that my name appears in Block 10, or on an attachment with an address. SIGNATURE: <u>Wei Sheng Zhong</u> <u>2-22-99</u> SIGNATURE AND TITLE OF OFFICER OR AUTHORIZED SIGNING MANAGER (PRINT NAME AND TITLE) DATE |
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