

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000007999

FILED
May 05, 2008
Secretary of State

Entity Name: TIEN TAO INSTITUTE, INC.

Current Principal Place of Business:

1249 HOLDEN AVE.,
ORLANDO, FL 32839

New Principal Place of Business:

Current Mailing Address:

10193 BRANDON CIR
ORLANDO, FL 32836

New Mailing Address:

1249 HOLDEN AVE.
ORLANDO, FL 32839

FEI Number: 59-3709999 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

CHAN, ERIC
10193 BRANDON CIR
32836, FL 32824 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LEE, HOWARD
Address: 2039 ROSLYN LN
City-St-Zip: LAKE LAND, FL 33813

Title: D () Delete
Name: LEE, PETER
Address: 926 BEACH BREZE DR
City-St-Zip: ORLANDO, FL 32835

Title: D () Delete
Name: CHAN, ERIC A
Address: 10193 BRANDON CIR
City-St-Zip: ORLANDO, FL 32836

Title: D () Delete
Name: UNG, YIN TIV
Address: 5420 GAMBIER CT
City-St-Zip: ORLANDO, FL 32839

Title: D () Delete
Name: KING, GRACE
Address: 620 N PALM AVE
City-St-Zip: KISSIMMEE, FL 34741

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

Title: D () Change (X) Addition
Name: MAA, CHI K
Address: 1249 HOLDEN AVE
City-St-Zip: ORLANDO, FL 32839

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 or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER LEE

D

05/05/2008

Electronic Signature of Signing Officer or Director

Date