2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 18, 2007
Secretary of State

DOCUMENT# N36237

Entity Name: CHUNG WAH CEMETERY ASSOCIATION OF MIAMI, INC.

Current Principal Place of Business:

% FELIPE LI
13939 LAKE SUCCESS PLACE
MIAMI LAKES, FL 33014

New Principal Place of Business:

Current Mailing Address:

% FELIPE LI
13939 LAKE SUCCESS PLACE
MIAMI LAKES, FL 33014

New Mailing Address:

FEI Number: 65-0328490 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LI, FELIPE
13930 LAKE SUCCESS PLACE
MIAMI LAKES, FL 33014 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:	S	( ) Delete
Name:	NG, AARON	
Address:	7467 NW 169TH LANE	
City-St-Zip:	HIALEAH, FL 33016	
Title:	V	( ) Delete
Name:	CHOI, PAK	
Address:	1480 NW 96TH AVENUE	
City-St-Zip:	MIAMI, FL 33172	
Title:	D	( ) Delete
Name:	LI, FELIPE	
Address:	13930 LAKE SUCCESS PLACE	
City-St-Zip:	MIAMI LAKES, FL 33014	
Title:	D	( ) Delete
Name:	KWAN, WING FAT	
Address:	1750 W FLAGLER ST	
City-St-Zip:	MIAMI, FL 33135	
Title:	P	( ) Delete
Name:	MUI, WAI CHIU	
Address:	780 E 39TH STREET	
City-St-Zip:	HIALEAH, FL 33013	
Title:	T	( ) Delete
Name:	LEUNG, CHAM T	
Address:	388 NE 177TH TERRACE	
City-St-Zip:	N MIAMI BEACH, FL 33162	

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

I hereby certify that the information supplied with this filing does not qualify for the 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: FELIPE LI D 03/18/2007

Electronic Signature of Signing Officer or Director — Date