


**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P00000041241</b> 1. Entity Name JIANG HUA (U.S.) INC.	
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Principal Place of Business  
7765 BARDMOOR HILL CIRCLE  
ORLANDO, FL 32835

Mailing Address  
539 N. MILLS AVENUE  
ORLANDO, FL 32803



03212005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-3690090	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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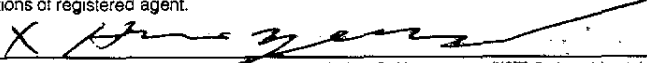
**6. Name and Address of Current Registered Agent**

YANG, HUI  
7765 BARDMOOR HILL CIRCLE  
ORLANDO, FL 32835

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE



Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

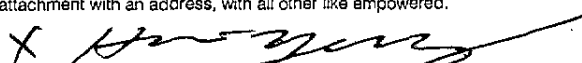
TITLE	D
NAME	YANG, JIAN
STREET ADDRESS	7765 BARDMOOR HILL CIRCLE
CITY - ST - ZIP	ORLANDO, FL 32835
TITLE	D
NAME	YANG, SHUQUAN
STREET ADDRESS	7765 BARDMOOR HILL CIRCLE
CITY - ST - ZIP	ORLANDO, FL 32835
TITLE	D
NAME	YANG, HUI
STREET ADDRESS	7765 BARDMOOR HILL CIRCLE
CITY - ST - ZIP	ORLANDO, FL 32835
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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05/02/05-80101-003 150.00

**DO NOT WRITE  
IN THIS SPACE**

12. I 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 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 address, with all other like empowered.

SIGNATURE:



SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #