

04-21-2002 90913 034 ***150.00

**FOR PROFIT CORPORATION
 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *P00000075996*

1. Entity Name

Bluehouse Technology, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
10000 Bay Harbor Terrace

3. Mailing Address
10000 Bay Harbor Terrace

DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.
Apt # 304

Suite, Apt. #, etc.
Apt # 304

City & State
Bay Harbor Islands, FL

City & State
Bay Harbor Islands, FL

4. FEI Number
65-1034457

Applied For
 Not Applicable

Zip
33154

Country
U.S.A.

Zip
33154

Country
U.S.A.

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

7. Name and Address of Current Registered Agent

Name
Guibin Li

Street Address (P.O. Box Number is Not Acceptable)
10000 Bay Harbor Terrace, Apt #304

City *Bay Harbor Islands* FL Zip Code *33154*

**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.

SIGNATURE

Guibin Li

4/10/02

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

(NOTE: Registered Agent signature required when substituting)

DATE

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is **\$150.00**
 After May 1, Fee is **\$550.00**
 Amended UBR is **\$61.25**
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
 NAME
 STREET ADDRESS
 CITY - ST - ZIP
*PD
 Li, Guibin
 10000 Bay Harbor Terrace #304
 Bay Harbor Islands, FL 33154*

TITLE
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 11 or on an attachment with an address, with all other like empowers.

SIGNATURE:

Guibin Li

4/10/02

305-867-4019

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)