

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000076052

Entity Name: CHINA HOUSE INC. OF LEESBURG

FILED  
Feb 19, 2009  
Secretary of State

## Current Principal Place of Business:

27615 HWY 27, #111  
LEESBURG, FL 34748

## New Principal Place of Business:

## Current Mailing Address:

27615 HWY 27, #111  
LEESBURG, FL 34748

## New Mailing Address:

FEI Number: 59-3665757

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LIU, YI RONG  
27615 HWY 27, #111  
LEESBURG, FL 34748 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: LAU, YI JIE  
Address: 27615 HWY 27 #111  
City-St-Zip: LEESBURG, FL 34748

Title: D ( ) Delete  
Name: LIU, YI RONG  
Address: 7529 FRONTIER DR  
City-St-Zip: YALAH, FL 34797

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: LIU, XIU J  
Address: 7529 FRONTIER DR  
City-St-Zip: YALAH, FL 34797

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LIU, YI RONG

D

02/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date