FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED Apr 09, 2002 8:00 am Secretary of State

DOCUMENT # POODDOLDOOD 3 1. Entity Name WOON CHOW TRAIDING, INC.			04-09-2002 91159 035 ***150.00
WON CHOW TRAISING, INC.			
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 32 Wood LARK Drive 3. Mailing Address 32 Wood LARK Drive Suite, Apt. #, etc.		Drive	B0061916 DO NOT WRITE IN THIS SPACE
City & State DAUEN PORT, FL	City & State DAVEN PORT, F-L		4. FEI Number 59-3676118 Applied For Not Applicable
Zip Country	Zip 3 891 Count	try	5. Certificate of Status Desired \$8.75 Additional Fee Required
DO NOT WRITE IN THIS SPACE		7. Name and Address of Current Registered Agent Name Li, JIN Fy Street Address (P.O. Box Number is Not Acceptable) 32 Wood LARK DAIVE City DAVENDORT FL Zip Code 33,891	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible Tax filling 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.			
11. OFFICERS AND DIRECT ITILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TO A LI JIN FU STREET ADDRESS CITY-ST-ZIP OFFICERS AND DIRECT DAVIEW PORT, TU 3320 THE STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREE CITY- TITLE NAME STREE	ET ADDRESS ST-ZIP	
NAME STREET ADORESS CITY-ST-ZIP TITLE	CITY-	T ADDRESS ST-ZIP	DO NOT WRITE
NAME STREET ADDRESS CITY-ST- ZIP TITLE NAME STREET ADDRESS CITY-ST- ZIP TITLE NAME	CITY- TITLE NAME STREE CITY- TITLE	ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP 13 horsely costify that the information appelled with this fi	CiTY-	T ADDRESS ST-ZIP	tion 110 07/2Vi). Florida Statutas Livether actifus that the information

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: B L JIN JW LI, JIN FU, PRESIDENT, 3-18-01- 883-420-8804