FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 91303 001 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR DOCUMENT # P01000002541 1. Entity Name
WANG CHENG, INC. 11024250 Principal Place of Business Malling Address 7430 W. COMMERCIAL BLVD. 7430 W. COMMERCIAL BLVD. LAUDERHILL FL 33319 LAUDERHILL, FL 33319 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Sulte, Apt. #. etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-1086455 Not Applicable Zlp Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LI, WEI CHENG 7430 W. COMMERCIAL BLVD. Street Address (P.O. Box Number is Not Acceptable) LAUDERHILL, FL 33319 City Zip Code 2. 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 SIGNATURE Signature, typed or primed name of registered agent and life 4 applicable (NOTE: Received Agent synature re-CATE FILE NOWILL FEE LS \$150.00.
After May 1 2003 Fee Will be \$550.001.
Make Check Payable to Florida Department of State 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE TITLE ☐ Change NAME LL WEI CHENG MALLE 3266 NW 123RD AVE STREET ADDRESS STREET ADDRESS CITY-ST-2P SUNRISE, FL 33323 CMY-51-21P titi é 1ALE ☐ Delete ☐ Change ☐ Addition ----NAME KAME STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-ZIP 7171 F ☐ Delete 11116 ☐ Change ■ Addition NAME MALIF STREET ADDRESS STREET ADDRESS CITY-ST-ZP CAY-ST-ZIP T/A F De lete TOLE Change ☐ Addition NAME NALE STREET ADDRESS STREET ADDRESS CITY-ST-2P CITY-ST-ZIP TITLE ☐ Delete 111 F ☐ Change ☐ Addition NAME MALAS STREET ADDRESS 34. STREET ADDRESS CITY-ST-2P City-St-ZiP TITLE ☐ Delete TITLE ☐ Change Addition NAME HALLE STREET ADDRESS STREET ADDRESS CITY-ST-2P CATY-ST-ZIP 12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119,07(3)(1). 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 direction of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered. Weicheng SIGNATURE: