

FILED  
Apr 09, 2003 8:00 am  
Secretary of State

04-09-2003 90198 003 \*\*\*150.00

2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)

10062898

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| <b>DOCUMENT # P01000005194</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                      |                                                                                                                                      |                                                                                                                                                       |
| 1. Entity Name<br><b>T.H. INTERNATIONAL, INCORPORATED</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                      |                                                                                                                                      |                                                                                                                                                       |
| Principal Place of Business<br>500 W. AIRPORT BLVD., #1716<br>SANFORD, FL 32773                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                      | Mailing Address<br>500 W. AIRPORT BLVD., #1716<br>SANFORD, FL 32773                                                                  |                                                                                                                                                       |
| 2. Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                      | 3. Mailing Address                                                                                                                   |                                                                                                                                                       |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                      | Suite, Apt. #, etc.                                                                                                                  |                                                                                                                                                       |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                      | City & State                                                                                                                         |                                                                                                                                                       |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Country                                                                                                              | Zip                                                                                                                                  | Country                                                                                                                                               |
| 4. FEI Number <b>59-3690304</b> Applied For <input type="checkbox"/> Not Applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                      |                                                                                                                                      |                                                                                                                                                       |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                      |                                                                                                                                      |                                                                                                                                                       |
| 6. Name and Address of Current Registered Agent<br><b>HUANG, ZHONG REN<br/>500 W. AIRPORT BLVD., #1716<br/>SANFORD, FL 32773</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                      | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City <b>FL</b> Zip Code |                                                                                                                                                       |
| 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 _____ (NOTE: Registered Agent's signature required when registering)<br>Signature, typed or printed name of registered agent and title if applicable. DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                      |                                                                                                                                      |                                                                                                                                                       |
| 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                      |                                                                                                                                      |                                                                                                                                                       |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                                                                                      |                                                                                                                                      |                                                                                                                                                       |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | DS<br>HUANG, ZHONG REN<br>500 W. AIRPORT BLVD., #1716<br>SANFORD, FL 32773<br><input type="checkbox"/> Delete        | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | TD<br>TANG, YUPING<br>500 W AIRPORT BLVD, # 1716<br>SANFORD, FL 32773<br><input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | TD<br>HUBRID, YU PING<br>500 W AIRPORT BNLVD M 16<br>SANFORD, FL 32773<br><input checked="" type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                     |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete                                                                                      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP                                                                                       | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                     |
| 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:  <b>TANG, YUPING, T.D. 4-2-03. 407-648-8869</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                      |                                                                                                                                      |                                                                                                                                                       |