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COVER LETTER

Division of Corporations
SUBJECT: WANG SHEN, INC. (Name of Corporation)
DOCUMENT NUMBER: Polooo52212
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
(Name of Contact Person)
Wang Shen INC (Firm/Company)
J (Firm/Company)
5349 Lyons Rd
✓ (Address)
Coconut Cheek / F-L 33073 (City/State and Zip Code)
(0.3,000)
For further information concerning this matter, please call:
We L G You at (954) 736 - 8534 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section

Division of Corporations P.O. Box 6327

Division of Corporations Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Street Address: Amendment Section

TO:

Amendment Section

* STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS	
Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.	•
1. The name of the corporation: WANG SHEN, INC.	
2. The principal office address: 3689 NEWPORT AVE. BOYNTON BEACH FL 33436	
3. The mailing address (if different): 5349 Lyons Rd	
Pompano Beach FL 33073	
4. Date of incorporation/qualification: at 124/200 Document number: Pologoo522/27	_
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: You WeI Guang 2.2	.:.
3689 NAUPORT AVE	
Boynton Beach, FL 33436	
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): You, Wel Guarg 5349	
Pomparo Sch. FL 33073	
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
(Signature of an officer or director) (Signature of an officer or director) (Printed or typed name and title)	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
Well (Signature of Registered Agent) 9/26/06 (Signature of Registered Agent)	
If signing on behalf of an entity:	
. (Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

* * * FILING FEE: \$35.00 * * *