

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

3/4

FILED
Apr 04, 2005 8:00 am
Secretary of State

03-04-2005 90070 046 ***150.00

DOCUMENT # P01000076103

1. Entity Name
CHINA 1 AT VENICE, INC.



Principal Place of Business

**1192 JACARANDA
VENICE, FL 34292**

Mailing Address

**539 N MILLS AVE
ORLANDO, FL 32803**

DO NOT WRITE IN THIS SPACE



02202005 No Chg-P CR2E034 (10/03)

4. FEI Number
65-1123496

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ZHENG, XIN Y
1192 JACARANDA
VENICE, FL 34292**

**DO NOT WRITE
IN THIS SPACE**

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

X Lin Jun zheng

(NOTE: Registered Agent signature required when re-registering)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PO
NAME	ZHENG, XIN Y
STREET ADDRESS	1192 JACARANDA
CITY - ST - ZIP	VENICE, FL 34292
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *X Lin Jun zheng*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/30/05

Date

Daytime Phone #