## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jan 17, 2006 8:00 am Secretary of State 01-17-2006 90245 028 \*\*\*150.00

DOCUMENT # P01000119501  1. Entity Name CHINA TOKYO EXPRESS, INC.				01-17-2000 90243 020	30.00	
Principal Place of Business 1561 NW 168TH AVENUE PEMBROKE PINES, FL 33028		Mailing Address 1561 NW 168TH AVENUE PEMBROKE PINES, FL 33028		60002573		
2. Principal Place of Business 5796 Bird Road		3. Mailing Address 5796 Bird Road				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01092006 Chg-P CR2E034 (11/05)		
City & State Miami, FL		City & State Mami, FL		i		
<sup>Zip</sup> 33	155 Country UBA	33155	Country USA	5. Certificate of Status Desired See Require		
STEVEN C	V. Hante and Address of Carrent	tegistered Agent	Street Address	7. Name and Address of New Registered Agent ONG Hyon Kim Se (P.O. Box Number is Not Acceptable)  7. SW 181 AVE Shroke Pines FL Zip Cod 330		
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  Signstine, type-dor printed hards of registered agent and title if applicable.  [NOTE: Registered Agent signature required when reinstating]  DATE						
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Added to Fees						
10.	OFFICERS AND D	DIRECTORS Delete	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	STEVEN C.P. HSUN 1561 NW 168TH AVENUE PEMBROKE PINES, FL 33028	LES Deserte	NAME STREET ADDRESS CITY-ST-ZIP	□ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZP	TD HSUN, ROSA F 1561 NW 168TH AVENUE PEMBROKE PINES, FL 33028	☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP	Change	Addition	
TITLE NAME STREET AUDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-SI-ZIP	PD Change YONG Hyarkim 597 SW 181 AVE Pembroke Pines, FL 33029	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CHTY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADORESS CITY-S1-ZIP	☐ Change	Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: Young Hyon Kin /11 06(305)668-3836						