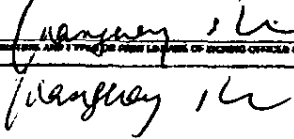


FILED
May 29, 2003 8:00 am
Secretary of State

04-28-2003 91297 017 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

55044685

DOCUMENT # P02000004686		
1. Entity Name PAN CONTINENTAL TRADING CORPORATION		
Principal Place of Business 4136 CORSAIR AVE. KISSIMEE, FL 34741		Mailing Address P.O. BOX 420925 KISSIMEE, FL 34742
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.
City & State		City & State
Zip	Country	Zip Country
4. FEI Number 03-0380627		Applied For Not Applicable
5. Certificate of Status Desired		68.75 Additional Fee Required
6. Name and Address of Current Registered Agent SHI, JIANGLIANG 4136 CORSAIR AVE. KISSIMEE, FL 34741		7. Name and Address of New Registered Agent N/A
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.		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5,000 May Be Added to Fees
SIGNATURE 		DATE 4/22/03
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete SHI, JIANGLIANG 4136 CORSAIR AVE. KISSIMEE, FL 34741	☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-STATE-ZIP
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-STATE-ZIP
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-STATE-ZIP
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-STATE-ZIP
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	☐ Change ☐ Addition TITLE NAME STREET ADDRESS CITY-STATE-ZIP
12. I hereby certify that the information supplied with this filing 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 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: 		DATE: 4/22/03 407-222-7113