2007 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 12, 2007 8:00 am Secretary of State 03-12-2007 90096 018 ***150.00 DOCUMENT # P02000006090 DRAGON VILLAGE EXPRESS, INC. Principal Place of Business Mailing Address 40033609 5567 W OAKLAND PARK BLVD 5195 NW 74TH PL LAUDERHILL, FL 33313 COCONUT CREEK, FL 33073 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01252007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 04-3590900 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent YANG, HSU RU 5567 W OAKLAND PARK BLVD Street Address (P.O. Box Number is Not Acceptable) LAUDERHILL, FL 33313 City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PΩ TITLE Delete TITLE ☐ Change ☐ Addition YANG, HSU RU NAME NAME STREET ADDRESS 5567 W OAKLAND PARK BLVD STREET ADDRESS LAUDERHILL, FL 33313 CITY-ST-ZIP CITY-ST-ZIP TITLE VD ☐ Delete TITLE ☐ Change ☐ Addition YANG, YI HSUN NAME NAME STREET ADDRESS 5567 W OAKLAND PARK BLVD STREET ADDRESS CITY-ST-7IP LAUDERHILL, FL 33313 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change noilibbA NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ТΙΠΕ ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Detele TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby 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:

HSURU

(954)415-088f

FILED