## 2004 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED Jan 27, 2004 8:00 am Secretary of State

Caytime Phone #

DOCUMENT # P02000022566  1. Entity Name CHINA FIRST AT SPRING HILL, INC.					01-27-2004 90	004 018 ***1	50.00
Principal Place of Business 4670 COMMERCIAL WAY SPRING HILL, FL 34606		Mailing Address 4670 Connercial Way Spring Hill, FL 34606			44004733		
Principal Place of Business     Suite, Apt. #, etc.		3. Malling Address 539 N Mills AVE Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES		
City & State		City & State		4.	4. FEI Number Applied For		
Zip		Orlando, t-			Certificate of Status Desired	Not Applicable  \$8.75 Additional Fee Required	
6. Name and Address of Current		legistered Agent		7.	7, Name and Address of New Registered Agent		
KIN, JING	Name						
4670 COMN	MERCIAL WAY LL, FL 34606		Street Ad	dress (P.O. I	Box Number is Not Acceptable)		
			City	·		FL Zip C	ode
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 JULI Signatural, Appeal or printed marine of registerred against and title if applicable. (NOTE: Registered Agains signature required when reinstanting)  Oute							
FILE NOW!! FEE 8 \$450,00:  After May 1: 2003 Fee will be \$550,00:  Amended UBR is \$61.26  Make Check Payable to Florida Department of State							
10.	OFFICERS ANI	O DIRECTORS	11.	Al	DDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	DRS IN 11
TITLE NAMÉ	DP	Delete	10 LE			Chang	je 🗌 Addition
STREET ADDRESS CITY-ST-ZP	LIN, JING 4670 COMMERCIAL WAY SPRING HILL, FL 34606		STREET ADDRESS CITY-ST-ZIP				
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STREET ADDRESS CITY-ST-ZP,	1		STHEET ADDRESS City-St-Zip				
12. I hereby (	certify that the information supplied wi	th this filing does not qualify for the	e exemption state	d in Section	119.07(3Xi), Florida Statutes. I fu	rther certify that th	e 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 AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: X