


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 17, 2008 08:00 A**  
**Secretary of State**

<b>DOCUMENT # P02000024986</b>	
1. Entity Name <b>GZ CONCEPTS DESIGN, INCORPORATED</b>	

Principal Place of Business <b>8145 WOODWORTH DRIVE ORLANDO, FL 32817</b>	Mailing Address <b>8145 WOODWORTH DRIVE ORLANDO, FL 32817</b>
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**DO NOT WRITE IN THIS SPACE**



02162008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>01-0621723</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**GUANGHUI, ZHAO  
8145 WOODWORTH DR  
ORLANDO, FL 32817**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	<b>000000902535 04/30/08-80009-025 150.00</b>
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ZHAO, GUANGHUI 8145 WOODWORTH DRIVE ORLANDO, FL 32817
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD LI, ZI 8145 WOODSWORTH DR ORLANDO, FL 32817
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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:  **2/29/08**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #