2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGN

Feb 19, 2004 8:00 am Secretary of State DOCUMENT # P02000028897 02-19-2004 90012 032 ***150.00 XANADU TIMEPIECE CORPORATION Principal Place of Business Mailing Address 1041 WEST COMMERCIAL BLVD STE 201 1041 WEST COMMERCIAL BLVD STE 201 24000313 FT LAUDERDALE, FL 33309 FT LAUDERDALE, FL 33309 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02022004 CR2E034 (10/03) Applied For City & State City & State 4. FEI Number 02-0564794 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent BASSANIO WONG LAM, GRANT Street Address (P.Q. Box Number is Not Acceptable) 1041 WEST COMMERCIAL BLVD STE 201 FT LAUDERDALE, FL 33309 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 ^After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. President Change TITLE Delete TITLE ☐ Addition BASSANIO WONG LAM, GRANT NAME NAME 1041 W Commercial Blod #201 4913 NW 66 AVE STREET ADDRESS STREET ADDRESS LAUDERDALE, FL 33319 CITY-ST-ZIP CITY-ST-7IP Fland FC 3230 Vice President Yim Ping Cindy Wong 1041 W Commercial Bld #2-1 Change ☐ Addition TITLE Delete TITLE WONG, MICHAELS NAME 3101 NE 56 COURTUM STEETS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 31 FT LAUDERDALE, FL 33308 CITY-ST-ZIP 33309 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TIT! F NAME NAME STREET ADDRESS STREET ADDRESS er audüs CITY-ST-ZIP CITY-ST-ZIP. ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP: 12/II hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 a raddress, with all other like empowered.

FILED

2-16-2004