2004 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

FILED Feb 02, 2004 08:00 AM DOCUMENT # P02000059186 Secretary of State 1. Entity Name WORLD TRADING SOLUTIONS, INC. Principal Place of Business Mailing Address 10723 SW 14TH PLACE 10723 SW 14TH PLACE DAVIE FL 33324 DAVIE FL 33324 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite Apt #, etc MOORE CR2E034 (11/03) City & State City & State 4. FEI Number Applied For 16-1618603 Not Applicable Country Zia 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 TAO, WEN HUA Street Address (P.O. Box Number is Not Acceptable) 10723 SW 14TH PLACE DAVIE FL 33324 Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE TITLE Change Addition 1/00000026489 TAO, WEN HUA NAME NAME 02/03/04-80010-005 150.00 10723 SW 14TH PLACE STREET ADDRESS STREET ADDRESS CITY - ST- ZIP DAVIE FL 33324 CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME SANGSUKWIRASATHIEN, WEN NAME STREET ADDRESS 10723 SW 14TH PLACE STREET ADDRESS DAVIE FL 33324 CITY - ST - ZIP CITY - ST- 7IP SD Change | TITLE ☐ Delete THE Addition NAME NAME WEI, RUI FEN STREET ADDRESS 10723 SW 14TH PLACE STREET ADDRESS CITY-ST-ZIP CITY - ST- ZIP DAVIE FL 33324 TD TITLE ☐ Delete TITLE ☐ Change Addition LIAN, JING P NAME NAME 10723 SW 14TH PLACE STREET ADDRESS STREET ADDRESS DAVIE FL 33324 CITY-ST-ZIP C(TY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-2IP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP

12. I 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 in changed, or on an attachment with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

jan 28/04.