## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

	003 FOR PRO			FILED Apr 18, 2003 8:00 am Secretary of State
DOCU 1. Entity Nam	MENT # P020	000071637		Secretary of State 04-18-2003 90202 002 ***150.00
DA DAO	CHAN GONG CENTER, I	NC.		
Principal Plac 25 MATADOR DAVIE FL 333	LN	Mailing Address 25 MATADOR LN DAVIE FL 33324		
	Place of Business  Amel as above	3. Mailing Address  Same as a	bone	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		☐ CHECK HERE IF MAKING CHANGES
City & Stat	е	City & State		4. FEI Number
Zip 	Country	Zip	Country	5. Certificate of Status Desired
	6. Name and Address of Curre	ent Registered Agent	None	7. Name and Address of New Registered Agent
FU, WEIZI	HONG		Name	Address (CO. Rev.) And Address (No. Address
25 MATAE DAVIE FL	OOR LN		Street Ad	Address (P.O. Box Number is Not Acceptable)
A.	33324		City	FL 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				
After	ILE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.0 Payable to Florida Departmen			9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
10.	<del></del>	ND DIRECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT   Fu, Weizhong   25 Matador LN   Davie Fl 33324	☐ Deleţe	NAME STREET ADDRESS CITY-ST-ZIP	Vice President Addition  Fu, Weizhong  25 Matador Lane  Davie FL 33324
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS YU, JENNIFER W 8911 SW 20 PL D FT LAUDERDALE FL 33324	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President & Treasure   Change   Addition   Yu, Jennifer   W. 8911 SW 20th Place, D   Bt Janderdale, 323334   Change   Addition   Addition   Statement   Change   Addition   Change   Addition   Change
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary  Barbara Addison, Barbara  101 Briny Ave., # 2303  Pompano Beach, FL 33062  Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby of indicated of the cor	on this report or supplemental repo	rt is true and accurate and that my npowered to execute this report a	he exemption state signature shall have	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information have the same legal effect as if made under oath; that I am an officer or director apter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if