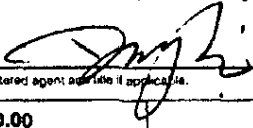


2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-07-2003 91047 020 ***150.00

DOCUMENT # P02000078208			
1. Entity Name EMINENT, INC.			
Principal Place of Business 4100 NE 2ND AVENUE SUITE 218 MIAMI FL 33137		Mailing Address 4100 NE 2ND AVENUE SUITE 218 MIAMI FL 33137	
2. Principal Place of Business 4100 NE 2ND AVE Suite, Apt. #, etc. 218		3. Mailing Address 4100 NE 2ND AVE Suite, Apt. #, etc. 218	
City & State MIAMI FLORIDA		City & State MIAMI FLORIDA	
Zip 33137	Country U.S.A.	Zip 33137	Country U.S.A.
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		Applied For Not Applicable	
6. Name and Address of Current Registered Agent LI, DONG 4100 NE 2ND AVENUE SUITE 218 MIAMI FL 33137		7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ 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 date if applicable. (NOTE: Registered Agent signature required when reinstating)		DATE 03/26/03	
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State		9. Election Campaign Financing Trust Fund Contribution: ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LI, DONG 4100 NE 2ND AVENUE SUITE 218 MIAMI FL 33137 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZHENG, YAN RONG 4100 NE 2ND AVENUE SUITE 218 MIAMI FL 33137 ☐ 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
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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 if 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		DATE 03/26/2003 (305) 716 7571	

CR2E034 (10/02)

EMINENT, INC

4100 NE 2AVE 218
MIAMI, FL 33137

Attached
SS030829
#PO2000078208

April 19, 2003

P.O. BOX 1500

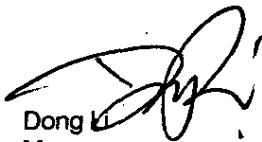
Tallahassee, FL 32302

DIVISION OF CORPORATIONS:

Because of my mistake, the report has been filed incorrect FEI number. The FEI number should be **52-2368423**. I have corrected the FEI number in the report. Please check again.

If you have any questions, please call 305-576-7571.

Sincerely,


Dong L.
Manager