
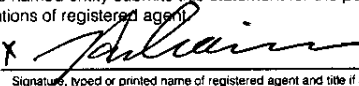
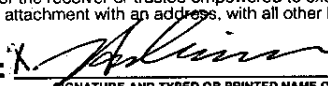


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2004 8:00 am
Secretary of State

01-20-2004 90057 004 ***150.00

DOCUMENT # P02000098513					
1. Entity Name ZHONGTIAN TRADING CORPORATION					
Principal Place of Business 10033 9TH ST. N., SUITE 108 ST. PETERSBURG, FL 33716			Mailing Address 10033 9TH ST. N., SUITE 108 ST. PETERSBURG, FL 33716		
2. Principal Place of Business 8252 124th Circle North Suite, Apt. #, etc.		3. Mailing Address 8252 124th Circle North Suite, Apt. #, etc.			
City & State Largo, Florida		City & State Largo, Florida		4. FEI Number 52-2375537	
Zip 33773		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JIA, CHUCK 8718 ORIENT WAY NE ST. PETERSBURG, FL 33702			7. Name and Address of New Registered Agent Name: Chuanmin Hu Street Address (P.O. Box Number is Not Acceptable): 8252 124th Circle North City: Largo, FL Zip Code: 33773		
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:  Chuanmin Hu 1/10/2004 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees Trust Fund Contribution.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JIA, CHUCK- <input checked="" type="checkbox"/> Delete 8718 ORIENT WAY NE ST. PETERSBURG, FL 33702		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Chuanmin Hu 8252 124th Circle North Largo, FL 33773	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GAO, ZHAN <input checked="" type="checkbox"/> Delete 3400 OAKCLIFF RD., #A-2A BORAVILLE, GA 30340		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:  Chuanmin Hu, 1/10/2004 727-507-0766 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					