

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000132213

1. Entity Name
KUO INTERNATIONAL, INC.



Principal Place of Business
**539 N MILES AVE
ORLANDO, FL 32803**

Mailing Address
**539 N MILES AVE
ORLANDO, FL 32803**



03302006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **57-1140550** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**KUO, WEN-SHUN
539 N MILES AVE
ORLANDO, FL 32803**

**DO NOT WRITE
IN THIS SPACE**

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 *X Wen Shun Kuo*
Signature, type or printed name of registered agent and type if applicable

(NOTE: Registered Agent signature required when retreating)

04/04/06
DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DP**
NAME **KUO, WEN-SHUN**
STREET ADDRESS **539 N MILES AVE**
CITY-ST-ZIP **ORLANDO, FL 32803**

TITLE **DV**
NAME **KUO, LIANG-FANG**
STREET ADDRESS **539 N MILES AVE**
CITY-ST-ZIP **ORLANDO, FL 32803**

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1100000496023
04/21/06-80034-015 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *X Wen Shun Kuo*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/04/06
Date

Daytime Phone #