APR-27-2004 01:3?PM FROM-

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2004 8:00 am
Secretary of State
04-30-2004 90280 020 ***150.00

66423881

03312004 Chg-P CR2E034 (10/03)

DOCUMENT # P03000022799

1. Entity Name
YINJOY INTERNATIONAL CO

Principal Place of Business: 1648 SUNNY BROOK LANE # M207, PALM BAY, FL 32905
Mailing Address: 1648 SUNNY BROOK LANE # M207, PALM BAY, FL 32905

2. Principal Place of Business

Suite, Apt #, etc.

City & State

Zip | Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip | Country

4. FEI Number 59-3768482 ☒ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent
ZHANG, MIAO
1648 SUNNY BROOK LANE # M207
PALM BAY, FL 32905

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 ______ DATE
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
After May 1, 2004 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	☐ Delete
NAME	ZHANG, MIAO	
STREET ADDRESS	1648 SUNNY BROOK LANE # M207	
CITY-ST-ZIP	PALM BAY, FL 32905	
TITLE	DVTS	☐ Delete
NAME	YIN, PANG Q	
STREET ADDRESS	1648 SUNNY BROOK LANE # M207	
CITY-ST-ZIP	PALM BAY, FL 32905	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Miao Zhang 04/27/04 (321)733-5475
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR | Date | Daytime Phone #