

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 23, 2005 08:00 AM
Secretary of State**

DOCUMENT # P03000037578

1. Entity Name
SHING HING INC



Principal Place of Business
**1731 NE 48TH CT
FORT LAUDERDALE, FL 33334 US**

Mailing Address
**1731 NE 48TH CT
FORT LAUDERDALE, FL 33334 US**



03162005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 61-1446378	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**LUI, TAI
1731 NE 48TH CT
FORT LAUDERDALE, FL 33334**

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P LUI, TAI 1731 NE 48TH CT FORT LAUDERDALE, FL 33334
--	---

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP LUI, TINGSUEN 1731 NE 48TH CT FORT LAUDERDALE, FL 33334
--	---

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LUI, KEVIN 1731 NE 48TH CT FORT LAUDERDALE, FL 33334
--	---

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LUI, AMY 1731 NE 48TH CT FORT LAUDERDALE, FL 33334
--	---

TITLE NAME STREET ADDRESS CITY - ST - ZIP	
--	--

TITLE NAME STREET ADDRESS CITY - ST - ZIP	
--	--

1100000273462
03/23/05-80029-009 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

Tai Lui **Tai Lui**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/05
Date

Daytime Phone #