## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Feb 16, 2007 08:00 A Secretary of State

ANNUAL REPORT				04
DOCU  1. Entity Nam  LAI HING		49		Secretary of Sta
Principal Place of Business  2900 W SAMPLE RD  9858 CLINT MOORE ROAD POMPANO BEACH, FL 33073 US  BOCA RATON, FL 33496			च इ	
DO NOT WRITE IN THIS SPACE				01102007 No Chg-P CR2E034 (11/05)  4. FEI Number 38-3681776 Applied For Not Applicable  5. Certificate of Status Desired □ \$8.75 Additional Fee Required
	6. Name and Address of Current Rev N FONG IT MOORE ROAD TON, FL 33496	istered Agent		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, types or printed name of registered agent and title if applicable  (NOTE Registered Agent signature required when reinstating)  DATE				
FiL After M:	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution.		5.00 May Be ded to Fees
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	OFFICERS AND DIF PDST LAM, YUEN FONG 9858 CLINT MOORE ROAD BOCA RATON, FL 33496	ECTORS		U00000637856 02/27/07-80006-015 150.00
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	orrito that the interception are all as	Those done not make the start	motions a literature	d in Chapter 110 Florida Standar 16 when and 20 to 15 to 15
12. I hereby certify that the information supplied with this filling 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 (mpowered to expoute 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 OF PRINTER NAME OFFICER OR DIRECTOR				