2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000075740

Entity Name
 GOLDEN LOTUS OF ORLANDO, INC.



FILED May 05, 2008 08:00 AN Secretary of State

Principal Place of Business

8365 S JOHN YOUNG PKWY ORLANDO, FL 32819 Mailing Address

8365 S JOHN YOUNG PKWY ORLANDO, FL 32819



DO NOT WRITE IN THIS SPACE

4. FEI Number Applied For 05-0580945 Not Applied be

5. Certificate of Status Desired

04152008

\$8.75 Additional Fee Required

CR2E034 (11/05)

6. Name and Address of Current Registered Agent

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

LO, JACKSON 8365 S JOHN YOUNG PKWY ORLANDO, FL 32819

DO NOT WRITE IN THIS SPACE

No Chg-P

| 8. | he 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 | pt |
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| | ne obligations of registered agent. | |
| | | |
| ç | NATURE | |

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00

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

OFFICERS AND DIRECTORS 10. TITE F LO, JACKSON NAME STREET ADDRESS 6209 DONEGAL DR CITY-ST-ZIP ORLANDO, FL 32819 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

U00000948112 06/02/08-80041-023 150.00

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:

STATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/08 40/312 3832