


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 27, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT #</b> P03000099545	
<b>1. Entity Name</b> DISTINGUISHED DRAGON, INC.	

<b>Principal Place of Business</b> 11741 NW 31ST ST. SUNRISE, FL 33323	<b>Mailing Address</b> 11741 NW 31ST ST. SUNRISE, FL 33323
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DO NOT WRITE IN THIS SPACE



02122006 No Chg-P CR2E034 (11/05)

<b>4. FEI Number</b> 56-2405688	<b>Applied For</b> <input type="checkbox"/> Not Applicable
<b>5. Certificate of Status Desired</b> <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

<b>6. Name and Address of Current Registered Agent</b>  KERN, JOSEPH 11741 NW 31ST ST. SUNRISE, FL 33323
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**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 wife if applicable. (NOTE: Registered Agent signature required when reinstating)) **DATE** \_\_\_\_\_

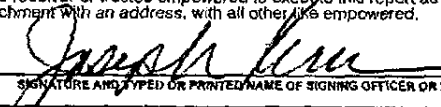
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	<b>9. Election Campaign Financing Trust Fund Contribution.</b> <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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10. OFFICERS AND DIRECTORS	
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	D KERN, JOSEPH 11741 NW 31ST ST. SUNRISE, FL 33323
<b>TITLE</b> NAME STREET ADDRESS CITY-ST-ZIP	D KERN, MEIRONG 11741 NW 31ST ST. SUNRISE, FL 33323
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03/09/06-80087-007 150.00

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**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 I am empowered.**

**SIGNATURE:**  **2-20-2006**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #