2005 FOR PROFIT CORPORATION

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED~, Jan 31, 2005 08:00 AM

ANNUAL REPURI			Convetage of State
DOCU 1. Entity Nan WJTV, IN			Secretary of State
	ce of Business Mailing Address		, rome ,
14975 TECHNOLOGY CT 14975 TECHNOLOGY CT FT MYERS, FL 33912			
DO NOT WRITE IN THIS SPACE			01112005 No Chg-P CR2E034 (10/03)
DO NOT WHEEL IN THIS OF AC		North Control	4. FEI Number Applied For 54-2126007 Not Applicable
		1	5. Certificate of Status Desired \$8.75 Additional
	6. Name and Address of Current Registered Agent		Fee Required
o, name and Address of Current Registered Agent			
WU, WEN-JONG			DO NOT WRITE
14975 TECHNOLOGY CT FT MYERS, FL 33912			
			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, typod or printed name of registered agent and little if applicable (NOTE flegistered Agent signature required when reinstating) DATE			
FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be			
	LE NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$550.00 Trust Fund Contribution.		ed to Fees
10.	OFFICERS AND DIRECTORS		
TITLE	D	1:	
NAME	WU, WEN-JONG		<u>, 000000</u> 207372
STREET ADDRESS CITY-ST-ZIP	14975 TECHNOLOGY CT FT MYERS, FL 33912	ľ	02/01/05-80043-007 150.00
TITLE	D	1	<u>.</u>
NAME	SMALE, JEFF		
STREET ADDRESS	14975 TECHNOLOGY CT	ļ	
CITY-ST-ZIP	FT MYERS, FL 33912		
TITLE NAME			}
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CITY -ST - ZIP		ľ	DO NOT WRITE
TITLE			IN THIS SPACE
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NAME			
STREET ADDRESS			
CITY-ST-ZIP	and the later the later with a small of the later than a small of the later than		No. 240 OTOM Total District
12. I hereby certify that the Information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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 this 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:			

- Date

Daytime Phone #