2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000110600

Title:

Name: Address:

City-St-Zip:

Entity Name: YAOFEN RESOURCES GROUP INC.

FILED Sep 10, 2004 Secretary of State

Littly Nan	HE. TAGLEN RESOURCES GROUP, II	NO.		
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
1031 IVES MIAMI, FL	DAIRY RD STE 228 33179			
Current Mailing Address:		New Mailing Addres	s:	
1031 IVES MIAMI, FL	DAIRY RD STE 228 33179			
FEI Number:	FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Current Registered Agent	:: Name and Address o	Name and Address of New Registered Agent:	
	I-ONIBO, M. LAWAL DAIRY RD STE 228 33179			
The above in the State	named entity submits this statement for t of Florida.	the purpose of changing its registere	d office or registered agent, or both,	
SIGNATUR				
	Electronic Signature of Registered	Agent	Date	
	ee with s. 607.193(2)(b), F.S., the corporation d	id not receive the prior notice.		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () Delete SULEIMAN-ONIBO, M. LAWAL 1508 SW 191 TERR PEMBROKE PINES, FL 33029	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete SALAHUDDIN, KHALID 11635 NE 21 DR MIAMI, FL 33181	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delete ESCOBAR, JOSEPH 8959 ALEXANDER CIR MIAMI, FL 33414	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: LAWAL M. SULEIMAN-ONIBO D 09/10/2004

() Delete

SAUER, BRAD

16100 SW 102 AVE

MIAMI, FL 33157

() Change () Addition