## 2006 FOR PROFIT CORPORATION

## **FILED**

ANNUAL REPORT				Apr 14, 2006 U8:00 Alv		
1. Entity Nam	MENT # P0400007969				Secretary of State	
				}		
Principal Place of Business         Mailing Address           3816 US HWY 90 WEST         3816 US HWY 90 WEST           LAKE CITY, FL 32055         LAKE CITY, FL 32055				•		
DO NOT WRITE IN THE SPACE				04072008	No Chg-P CR2E034 (11/05)	
DO NOT WRITE IN THIS SPA			CE	4. FEI Number   Applied For 57-1205714   Not Applicate		
				5. Certificate	of Status Desired \$8.75 Additional Fee Required	
	6. Name and Address of Current Regi-	stered Agent	}	<del></del>		
NGAI, WAN B 3816 US HWY 90 WEST LAKE CITY, FL 32055			DO NOT WRITE IN THIS SPACE			
8. The above the obligat	e named entity submits this statement for the tions of registered agent.	purpose of changing its register	ed office or register	red agent, or bo	oth, in the State of Florida. I am familiar with, and acce	
SIGNATURE Angar Connect name of registered opens and title is explicable. (NOTE. Register			ed Agent signature required	when reinstating)	4-10-16 DATE	
FIL After M	E NOWIII FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.		.00 May Be ed to Fees	U00000507610 04/27/06-80070-015 150.00	
10.	OFFICERS AND DIRE	CTORS	1			
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NAME STREET ADDRESS	NGAI, WAN B 3816 US HWY 90 WEST		į.			
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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 like empowered.

SIGNATURE:

NAME STREET ACCRESS CITY - ST - ZIP

Ma Wan Bing Bing SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR