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### 2005 FOR PROFIT CORPORATION ANNUAL REPORT

4/25/2005-90215-039-\$150.00-\$150.00

**FILED**

05 SEP 23 AM 9:53

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



04152005 Chg-P CR2E034 (10/03)

**DOCUMENT # P04000081173**

1. Entity Name  
CHINA NO.1, INC.

Principal Place of Business  
2595 S HIAWASSEE RD  
ORLANDO, FL 32835 US

Mailing Address  
539 N MILLS AVE  
ORLANDO, FL 32803 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip Country

Zip Country

4. FEI Number  
20-1160409

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent

WANG, CHING FEN  
2595 S HIAWASSEE RD  
ORLANDO, FL 32835

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

9. 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]*  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$250.00


8. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WANG, CHING FEN 2595 S HIAWASSEE RD ORLANDO, FL 32835 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIU, MING WEI 2595 S HIAWASSEE RD ORLANDO, FL 32835 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 filers empowered.

SIGNATURE: *[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF EXISTING OFFICER OR DIRECTOR DATE



SEP-26-2005 09:11 AM CHRISTINE.CHEW

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**CHINA NO. 1, INC.**  
539 N MILLS AVE  
ORLANDO, FL 32803

September 23, 2005

Florida Department of State  
P.O. BOX 1500  
Tallahassee, FL 32302-1500

**SUBJECT: Annual Report for 2005**

**DOCUMENT NUMBER: P04000081173**

To whom it may concern,

Please note that we had filed the annual report for year 2005 in April; however, it had been returned for missing FEI Number on May 6, 2005. As soon as we had noticed this mistake, we had filled out line 4 for FEI Number 20-1160409 and mailed back to your office address shown on the notice on May 16, 2005. We did not aware that your office has not received the reply mail yet until today. Attached please find the copy of replied annual report and the letter from your office. It would be highly appreciated if you could kindly waive the penalty. Thank you!

Sincerely yours

  
Helen Yang, Secretary