2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 24, 2006 08:00 AM Secretary of State

ANNUAL REPORT				Secretary of State	
DOCU	MENT # P04000095	772			=
1. Entity Name YANG'S HEALING THERAPY, INC.				À{	
YANGSI	HEALING THERAPT, INC.			/	
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-	e of Buşiness	Mailing Address			
1011 N MILI ORLANDO, F		1011 N MILLS AVE ORLANDO, FL 32803 US	}		
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DO NOT WRITE IN THIS SPAC			CE ;	4. FEI Number Applied	
			-	20-1279440 Not Ap	
			,	5. Certificate of Status Desired	al
	6. Name and Address of Current F	Registered Agent	[[A Committee of the Comm	
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YANG, XII 1011 N MI			}	DO NOT WRITE	
ORLANDO	D, FL 32803	. = -		IN THIS SPACE	
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8. The above the obligat	named entity submits this statement for tions of registered agent.	the purpose of changing its register	ed office of registe	tered agent, or both, in the State of Florida. I am tamiliar with, and	accabi
COMPANY STATES				4-22-06	
SIGNATURE.	Spireture, typed openinted name of registered agent a	nd title if applicable. (MOTE Registers	ed Agent signature require	ved when reinstalking) DATE	
	E MONOTI PER 10 64ED 55	9. Election Campaign Fina	ncina \$	5.00 May Be	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.0	To the Company of the same		dded to Fees	
10.	OFFICERS AND I	DIRECTORS			-
TITLE	P		1		
NAME STREET ADDRESS	YANG, XIU HUA 1011 N MILLS AVE		1	; ;	
C179 -ST -277	ORLANDO, FL 32803	-			•
TITLE					
NAME OTREET ADDRESS				1/00/00/0525861	
STREET ADDRESS CITY-ST-ZIP				05/04/06-80050-009 150.	00
BILE	<u> </u>		1	· ;	
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12. Thereby 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 outh; 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 AND TYPED OR MAINTED MADE OF HIGHING OFFICER OR DIRECTOR

SIGNATURE:

4-22-04

Osytime Phone #