2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE AND

Apr 28, 2005 8:00 am Secretary of State **DOCUMENT # P04000123795** 1 Entity Name 04-28-2005 90181 001 ***158.75 TUREND HOLDING LIMITED, INC. Principal Place of Business Mailing Address 1321 N FEDERAL HWY 1321 N FEDERAL HWY HOLLYWOOD, FL 33020 HOLLYWOOD, FL 33020 2. Principal Place of Business 3. Mailing Address Same Suite, Apt, #, etc. 03172005 Chq-P CR2E034 (10/03) 4. FEI Number 20 - 155 3852 Applied For City & State Same Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SPIEGEL & UTRERA, P.A. 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 3020 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 title if applicable, (NOTE: Registered Agent signature required when reinstaling) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWILL FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete TITLE TITLE ☐ Change Addition SANDOR, HARIS MAME MALES STREET ADDRESS 1321 N FEDERAL HWY STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33020 CITY-ST-ZIP VD TITLE Delete TOLE ☐ Change Addition TIBOR, CSAKANY NAME NAME STREET ADDRESS 1321 N FEDERAL HWY STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33020 CITY-ST-7/P TITLE ☐ Delete TILE ☐ Change Addition NAME TIBOR, PATZEK STREET ADDRESS 1321 N FEDERAL HWY STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 33020 CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition KISS, JOZSEF L DR NAME NAME STREET ADDRESS 1321 N FEDERAL HWY STREET ADDRESS HOLLYWOOD, FL 33020 CITY-ST-7/P CITY-ST-7/P TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHTY - ST - ZIP CITY-ST-ZIP TITLE ☐ Delcte ☐ Channe ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-78 CITY-ST-ZIP 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 employered a 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 addre-HOSE SIGNATURE:

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