2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000131430

FILED Aug 29, 2005 Secretary of State

Entity Name: NEW CHOPSTIX, INC. **Current Principal Place of Business: New Principal Place of Business:** P.O. BOX 1235 OLDSMAR, FL 34677 **Current Mailing Address: New Mailing Address:** P.O. BOX 1235 OLDSMAR, FL 34677 FEI Number: 30-0306504 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: TANG, VICTORIA 8502 TIDAL BAY LANE TAMPA, FL 33635 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. SIGNATURE: Electronic Signature of Registered Agent Date

Title:

OFFICERS AND DIRECTORS:

() Delete

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

TANG, VICTORIA TANG, VICTORIA Name: Name: 8502 TIDAL BAY LANE 8502 TIDAL BAY LANE Address: Address: City-St-Zip: TAMPA, FL 33635 City-St-Zip: TAMPA, FL 33635 Title: () Delete Title: VΡ () Change (X) Addition CHIU. KWOK JAN Name: Name:

 Name:
 Name:
 CHIU, KWOK JAN

 Address:
 Address:
 8502 TIDAL BAY LN

 City-St-Zip:
 City-St-Zip:
 TAMPA, FL 33635

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.

SIGNATURE: VICTORIA TANG P 08/29/2005