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(Requestor's Name)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Cartification of Status				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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DIVISION OF CORPORATIONS

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COVER LETTER

SUBJECT: CHINA INN CORPORATION (Name of Corporation) DOCUMENT NUMBER: P04000132290 The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MING JUAN CHEN (Name of Contact Person) CHINA INN CORPORATION (Firm/Company) 11150 N. WILLIAMS STREET, SUITE 103 (Address) **DUNNELLON, FL 34432** (City/State and Zip Code) For further information concerning this matter, please call: MING JUAN CHEN (Name of Contact Person) Enclosed is a \$35.00 check made payable to the Department of State. Street Address: Mailing Address: **Amendment Section Amendment Section Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

TO:

Amendment Section Division of Corporations

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	ange is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida Statutes ganized under the laws of the State of FLOF gistered agent, or both, in the State of Florida.	RIDA
1. The name of	the corporation: CHINA INN CORF	PORATION	
2. The principal	office address: 8891 NORTH MEI	NDOZA WAY, CITRUS SPRING, FL 34	1432
3. The mailing a	address (if different): 11150 N. WIL	LIAMS STREET, SUITE 103, DUNN	ELLON, FL 34432
4. Date of incor	poration/qualification: 09/21/2004	Document number: P040001322	!90
	d street address of the current registere rtment of State:	ed agent and registered office on file with the	
	ZHENG, ZHAN X		
8891 NORTH MENDOZA WAY			
	CITRUS SPRING, FL 344	432	<u>.</u> <u></u>
6. The name and (if changed):	d street address of the new registered a	agent (if changed) and /or registered office	NISION OF COR 2001 DEC -5
	CHEN, MING JUAN		S CONTRACTOR
	11150 N. WILLIAMS ST		AM IO: 10
	(P.O. Box NOT accept		0: 10 Toke
The street addr	· · · · · · · · · · · · · · · · · · ·	reet address of the business office of its regis	
Such change w authorized by t	as authorized by resolution duly ado he board, or the corporation has been	pted by its board of directors or by an office in notified in writing of the change.	er so
(Signat	her of an officer or director)	MING JUAN CHEN, PRESIDE	ENT
` •	,	t and agree to act in this capacity. statutes relative to the proper and complete obligation of my position as registered agen in the registered office address, I hereby conj nge.	performance it. Or, if this firm that the
	ignature of Registered Agent)	11/13/2007	
(S) If cianing on be	ehalf of an entity:	(Date)	
MING JUAI	·		
	Typed or Printed Name)		
	* * * FILING	FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)