2007 FOR PROFIT CORPORATION

Jul 06, 2007 8:00 am **ANNUAL REPORT Secretary of State DOCUMENT # P04000133699** 07-06-2007 90002 049 ***158.75 Alig TRADING COMPANY, INC. Principal Place of Business Mailing Address 5510 W COLONIAL DR STE 101 **477 WHITTINGHAM PLACE** ORLANDO, FL 32808 US LAKE MARY, FL 32746-3780 US 2. Principal Place of Business - No P.O. Box # 5510 W. CHOMO D. 3. Mailing Address 07022007 CR2E034 (12/06) 10 City & State 4. FEI Number Applied For 20-1670714 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired O range Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent charles HUANG, CHARLES Z 477 WHITTINGHAM PLACE como LAKE MARY, FL 32747-3780 8. The above named entity submits this statement for the purpose of cha agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE, Signature, typed or printed name of registered agent and title i egistered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Added to Fees Due by September 14, 2007 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. TITLE ☐ Delete TITLE ☐ Change ☐ Addition HUANG, CHARLES Z NAME NAME STREET ADDRESS 477 WHITTINGHAM PLACE STREET ADDRESS CITY - ST- ZIP LAKE MARY, FL 327463780 CITY-ST-ZIP TITLE Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. 1 hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. 1 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 like empowered.

SIGNATURE:

FILED