

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000138272

Entity Name: JARDINES DE CONFUCIO, INC.

FILED  
Mar 27, 2009  
Secretary of State

## Current Principal Place of Business:

10658 NW FOUNTAINE BLEAU BLVD.  
MIAMI, FL 33172

## New Principal Place of Business:

## Current Mailing Address:

10658 NW FOUNTAINE BLEAU BLVD.  
MIAMI, FL 33172

## New Mailing Address:

FEI Number: 20-1718299

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CHANG, TUNG  
10658 NW FOUNTAINBLEAU BLVD  
MIAMI, FL 33172 US

## Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: FOEN, YOLANDA  
Address: 10658 NW FOUNTAINE BLEAU BLVD.  
City-St-Zip: MIAMI, FL 33172

Title: V ( ) Delete  
Name: CHOI FOEN, JOSE  
Address: 10658 NW FOUNTAINEBLEAU BLVD  
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Delete  
Name: CHANG, TUNG  
Address: 10658 NW FOUNTAINEBLEAU BLVD  
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Delete  
Name: CHOI CHING, BETTY  
Address: 10658 FOUNTAINEBLEAU BLVD6  
City-St-Zip: MIAMI, FL 33172

Title: STD ( ) Delete  
Name: WONG, JAIRO  
Address: 906 APPIAN KNOLL COURT  
City-St-Zip: EL SOBRANTE, CA 94803

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: YOLANDO FOEN

PRES

03/27/2009

Electronic Signature of Signing Officer or Director

Date