2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000002485

1. Entity Name

WANG'S ENTERPRISE OF AMELIA, INC.



FILED Apr 17, 2008 08:00 A Secretary of State

Principal Place of Business

2817 PARK SQUARE PLACE FERNANDINA BEACH, FL 32034 Mailing Address

2817 PARK SQUARE PLACE FERNANDINA BEACH, FL 32034



DO NOT WRITE IN THIS SPACE

01172008 No Chg-P CR2E034 (11/05)

4. FEI Number 20-2391232

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WANG, CHEN HUANG 2817 PARK SQUARE PLACE FERNANDINA BEACH, FL 32034 DO NOT WRITE IN THIS SPACE

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees U00000903553 .04/30/08-80048-023-150.00

OFFICERS AND DIRECTORS 10. TITLE WANG, CHEN HUANG NAME 2817 PARK SQUARE PLACE STREET ADDRESS CITY-ST-ZIP FERNANDINA BEACH, FL 32034 TITLE WANG, HSIU CHENG NAME STREET ADDRESS 2817 PARK SQUARE PLACE CITY-ST-7IP FERNANDINA BEACH, FL 32034 TS TITLE WANG, HSIU CHENG NAME STREET ADDRESS 2817 PARK SQUARE PLACE CITY-ST-ZIP FERNANDINA BEACH, FL 32034 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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:

REALITYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(15/08 (904):