## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2006 8:00 am
Secretary of State
02-20-2006 90025 046 ***150.00

DOCUMENT # P05000040506  1. Entity Name CHINA KING ZHENG, INC.							02-20-2006	5 900 <b>25</b> 0	)46 ***15	0.00
Principal Place of Business Mailing Address 112 W MITCHELL HAMMOCK RD 5161 JOHN YOUNG PKWY							ስልሳ	18529	۵.	
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#110 ORLANDO, FL 32839 US OVIEDO, FL 32765 US										
2. Principal P	Place of Busin	AAAA	3. Mailing Address							
z. Findipai ri	lace of busin	1022	1/2 W mrtchell Hammock R							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			1272006	Chg-P	CR2E0	34 (11/05)	
City & State			井 [] D City & State			FEI Numbe				plied For
City & State			OVIEDO, FL				519009		<b>⊢</b>	Applicable
Zip	Country		Zip 32765	Country	5.	Certificate	of Status Desired		\$8.75 Add	
=	6. Name	and Address of Current		$\frac{D_{2}}{D_{2}}$	7.	Name and	Address of New I	Registered	Fee Require	<u> </u>
				Name						-
ZHENG, M 5161 JOHN		PKWY		Street A	ddress (P.O.	. Box Numbe	r is Not Acceptab	le)		.
ORLANDO	), FL 3283	39		112 1	J Mit	chell	Hammoc	L K	2D	
				City	VIFD	•	TIAMMOC	FL	Zip Cod	72.4.5
8. The above	named entity	y submits this statement fo	r the purpose of changing its				h, in the State of F		familiar with,	and accept
the obligat	tions of regist	Manual Page	•							
SIGNATURE_	Signature 1	A DOUBLE OF THE PROPERTY SOURCE	and title if applicable. (NOTI	: Registered Agent signat	un required whee	a coinceanina)		DATE		
		as printed terms of registros a again.								I .
				· · · · · · · · · · · · · · · · · · ·		,				
		FEE IS \$150.00 6 Fee will be \$550.0	9. Election Campai Trust Fund Cont	gn Financing		May Be				
			Trust Fund Cont	gn Financing	<b>\$5.00</b> Added to	May Be o Fees	CHANGES TO OF	FICERS AND	D DIRECTOR	S IN 11
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12. I hereby certify that the information supplied with this filing 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:

SIGNATURE AND TEMED OR PRINTED HASHE OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #