

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 21, 2008 8:00 am**  
**Secretary of State**

04-21-2008 90107 020 \*\*\*150.00

<b>DOCUMENT # P05000049322</b> 1. Entity Name <b>XUI BI CORPORATION</b>			
Principal Place of Business <b>117 SE 22 AVE BOYNTON BEACH, FL 33435</b>		Mailing Address <b>117 SE 22 AVE BOYNTON BEACH, FL 33435</b>	
2. Principal Place of Business - No P.O. Box # <b>931 VILLAGE BLVD</b>		3. Mailing Address <b>SUITE 906</b>	
Suite, Apt. #, etc. <b>SUITE 906</b>		Suite, Apt. #, etc. <b>WBST PALM BEACH, FL</b>	
City & State <b>33409</b>		City & State <b>33409</b>	
Zip <b>33409</b>		Country <b>33409</b>	
4. FEI Number <b>20-2611593</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>CHEN, ZHI RUI 117 SE 22 AVE BOYNTON BEACH, FL 33435</b>		7. Name and Address of New Registered Agent  Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ <b>FL</b> Zip Code _____	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P <input type="checkbox"/> Delete <b>CHEN, ZHI RUI 117 SE 22 AVE BOYNTON BEACH, FL 33435</b>	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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.			
<b>SIGNATURE:</b> <u>CHEN ZHI RUI</u> <b>ZHI RUI CHEN</b> <u>4/20/08</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			

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