

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000057774

FILED
Apr 21, 2007
Secretary of State

Entity Name: TRADITIONAL ACUPUNCTURE, INC.

Current Principal Place of Business:

961 W COMMERCIAL BLVD
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

3067 BAYBERRY WAY
MARGATE, FL 33063

New Mailing Address:

FEI Number: 20-2712470

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEPHEN W GILBERTSON, CPA, PA
2720 E OAKLAND PARK BLVD #109
FT LAUDERDALE, FL 33306 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: PSTD () Delete
Name: JIA, HUIFEN
Address: 3067 BAYBERRY WAY
City-St-Zip: MARGATE, FL 33063

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: REININGER, JEFFREY V
Address: 3067 BAYBERRY WAY
City-St-Zip: MARGATE, FL 33063

Title: VP () Change (X) Addition
Name: JIA, HUIFEN
Address: 3067 BAYBERRY WAY
City-St-Zip: MARGATE, FL 33063

I hereby certify that the information supplied with this filing does not qualify for the 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: JEFFREY V REININGER

PSTD

04/21/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date