

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000059447

Entity Name: NEO'S WORLD CORP.

FILED
Jul 24, 2006
Secretary of State

Current Principal Place of Business:

12649 NW 11 LANE
MIAMI, FL 33182

New Principal Place of Business:

8383 BIRD ROAD
MIAMI, FL 33155

Current Mailing Address:

12649 NW 11 LANE
MIAMI, FL 33182

New Mailing Address:

FEI Number: 59-3803799

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHANG, PEI-JU
12649 NW 11 LANE
MIAMI, FL 33182 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Change (X) Addition
Name: HUANG, HSIU-CHIN
Address: 12649 NW 11 LANE
City-St-Zip: MIAMI, FL 33182

Title: V/T () Change (X) Addition
Name: CHANG, PEI-JU
Address: 12649 NW 11 LANE
City-St-Zip: MIAMI, FL 33182

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: HSIU-CHIN HUANG

P

07/24/2006

Electronic Signature of Signing Officer or Director

_____ Date