P05000089509

(Requestor's Name)							
(Address)							
(<u>,</u>							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
0.475.4.0							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							
Special field and the field of							

Office Use Only



200074804432

05/23/06--01016--015 **35.00

SECRETARY OF STATE DIVISION OF CORPORATIONS

RA-Change 06/02/06 Dc

COVER LETTER

TO :	Amendment Section Division of Corporations
SUBJEC	CT: China Imports, Inc. (Name of Corporation)
DOCUM	MENT NUMBER: P 0500089509
The encl	osed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please re	eturn all correspondence concerning this matter to the following:
	Shimin Tao (Name of Contact Person) China Imports, Inc. (Firm/Company)
. ,	767.5. Kirkman Rd.
	Orlando, FL 32818 (City/State and Zip Code)
For furth	er information concerning this matter, please call:
<u>S1</u>	himin Tao at (407) 291 6669 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed	l is a \$35.00 check made payable to the Department of State.

to theck made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	inge is submitted	tions 607.0502, 617.0 for a corporation org gistered office or reg	ganized under th	e laws of the State o	s Florida	_
		egisierea office or reg	~ ·	_		,
2. The name of t	ne corporation	767 S.KI	ireman	Road		
z. The principal	office address	Orlando	, FL	32811		
3. The mailing a	ddress (if differe	nt):				
4. Date of incorp	oration/qualification	ation:	Docum	ent number:		
	street address of tment of State:	f the current registered	d agent and regis	stered office on file	with the	
	5/	himin To	āo			
	7,	104 Gray Orlando	shadou	J St.	<u>. </u>	<u> </u>
		Irlando:	, FL 32	.818	_ K	SECR /ISIO
6. The name and (if changed):	street address of	f the new registered a	gent (if changed)		ယ	_
	C_{i}	hengren	Li		- PH	0,,
	767	7 S. KIRKI (P.O. Box NOT accepts	nan R	oad	1:26	ATIC
	01	(P.O. Box NOT accepta	EL 3.	2811		SKS
The street addre	ss of its register	ed office and the stre	eet address of th	e business office of	— f its registered age	nt,
_		resolution duly ador corporation has been				
	10	2		Shimin	Tao	
• • •	re of an officer or dire	•		(Printed or typed name as	•	_
I hereby accept I further agree t of my duties, an document is bei corporation has	the appointment to comply with the d I am familiar v ng filed merely to been notified in	t as registered agent he provisions of all s wilh and accept the o o reflect a change in retting of this chan	and agree to actatutes relative to bligation of my the registered of the registered	t in this capacity, to the proper and c position as registe office address, I her	omplete performa red agent. Or, if i reby confirm that i	nce this the
·	Mon	n	<u>-:</u>	05/191	06	
J	nature of Registered A	(gent)		(Date)		
If signing on bel	half of an entity:	Li		•		
(T	yped or Printed Name) .	•			

* * * FILING FEE: \$35.00 * * *