

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007 8:00 am
Secretary of State

02-05-2007 90117 003 ***150.00

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01242007 Chg-P CR2E034 (12/06)

4. FEI Number 20-3421335 Applied For Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DOCUMENT # P05000122230

1. Entity Name
H & X TRADING INTERNATIONAL, INC.



Principal Place of Business
3779 NW 16TH STREET
LAUDERHILL, FL 33311

Mailing Address
3779 NW 16TH STREET
LAUDERHILL, FL 33311

2. Principal Place of Business - No P.O. Box #
5100 NW 165th ST

3. Mailing Address
5100 NW 165th ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Hialeah FL

City & State
Hialeah FL

Zip 33014 Country USA

Zip 33014 Country USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

XU, JING
3779 NW 16TH STREET
LAUDERHILL, FL 33311

Name Xu, Jing
Street Address (P.O. Box Number is Not Acceptable)
5100 NW 165th ST
City Hialeah FL Zip Code 33014

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD ☐ Delete
NAME XU, JING
STREET ADDRESS 3779 NW 16TH STREET
CITY-ST-ZIP LAUDERHILL, FL 33311

TITLE PSTD ☒ Change ☐ Addition
NAME Xu, Jing
STREET ADDRESS 5100 NW 165th ST
CITY-ST-ZIP Hialeah FL 33014

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Jing Xu

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

01/29/07 305 621 6888