2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: 1

Secretary of State DOCUMENT # P05000151599 01-20-2006 90029 006 ***158.75 1. Entity Name YUARN INTERNATIONAL, INC. Principal Place of Business Mailing Address 60004245 22140 GREENWICH CT W. 22140 GREENWICH COURT W. BOCA RATON, FL 33428 BOCA RATON, FL 33428 2. Principal Place of Business 433 Cottanewood 4-33 Cottagewood Ln. Suite, Apt. #, etc. Suite, Apt. #, etc 01122006 Chg-P CR2E034 (11/05) 4. FEI Numbe City & State City & State Palm Beach Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6: Name and Address of Current Registered Agent CHANG, MICHAEL " 22140 GREENWICH COURT W. Street Address (P.O. Box Number is Not Acceptable) BOCA RATON, FL 33428 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 a TIANGLIN SIGNATURE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. Р TITLE Delete TITLE ☐ Change ☐ Addition CHANG, MICHAEL NAME NAME STREET ADORESS STREET ADDRESS 22140 GREENWICH COURT W. BOCA RATON, FL 33428 CITY-ST-ZIP CITY-ST-ZIP NO PRES ☐ Defete TITLE ☐ Change ☐ Addition TITLE YUAN, JIANGLIN NAME NAME STREET ADDRESS 22140 GREENWICH COURT, W. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP BOCA RATON, FL 33428 TITLE ☐ Delete TITLE ☐ Change Addition UAN, HUI LIOU NAME NAME STREET ADDRESS Swnny Point STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change TITLE TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 33023 Delete ☐ Change Addition TITLE TITLE NAME ! NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 logal 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.

E OF SKNING OFFICER OR DIRECTOR

FILED Jan 20, 2006 8:00 am

Daylime Phone #