

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90202 009 ***150.00

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1. Entity Name
HAI TIAN INT'L TRADING INC



Principal Place of Business

~~FLEA WORLD HWY 17-92
SANFORD, FL 32773 US~~

2233 EAST 15TH STREET
building # 2

panama city, FL 32405. US

Mailing Address

~~1449 S KIRKMAN RD
APT 3021~~

ORLANDO, FL 32811. US

801 W 13th st Apt # B17
panama city, FL 32401. US



04212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-4527569

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

XIA, HAI JIAO
1449 S KIRKMAN RD
APT 3021
ORLANDO, FL 32773

801 W 13th st
Apt B19
panama city, FL 32401

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IN THIS SPACE**

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

Haijiao Xia

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, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME XIA, HAI JIAO
STREET ADDRESS 1449 S KIRKMAN RD APT 3021
CITY-ST-ZIP ORLANDO, FL 32811

801 W 13th st Apt B19
panama city, FL 32401

TITLE VP
NAME CHEN, AN ZE
STREET ADDRESS 1449 S KIRKMAN RD APT 3021
CITY-ST-ZIP ORLANDO, FL 32811

801 W 13th st Apt B19
panama city, FL 32401

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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: *X Haijiao Xia*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #