2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000042643

Entity Name: CHINA MAX SEMINOLE, INC.

FILED Jan 18, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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250 TOWNE CIRCLE SANFORD, FL 32771

Current Mailing Address: New Mailing Address:

 105 E S.R 434
 250 TOWNE CIRCLE

 WINTER SPRINGS, FL 32708
 SANFORD, FL 32771

FEI Number: 20-4558989 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FONG, DAVID

105 E. S.R. 434

WINTER SPRINGS, FL 32708

US

LEI, CHIAWEN

115 BOULDER CT

SANFORD, FL 32771

US

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: CHIAWEN LEI 01/18/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 WEN LEI, CHIA
 Name:
 LEI, CHIAWEN

 Address:
 115 BOULDER CT
 Address:
 115 BOULDER CT

 City-St-Zip:
 SANFORD, FL 32771
 City-St-Zip:
 SANFORD, FL 32771

Title: VPD () Delete Title: () Change () Addition

 Name:
 WONG, BETTY
 Name:

 Address:
 1817 WESTPOINTE CIRCLE
 Address:

 City-St-Zip:
 ORLANDO, FL 32835
 City-St-Zip:

Title: SD () Delete Title: () Change () Addition

 Name:
 LIU, TUN MIN
 Name:

 Address:
 9251 SOUTHERN BREEZE
 Address:

 City-St-Zip:
 ORLANDO, FL 32836
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: CHIAWEN LEI PD 01/18/2008