2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P06000141783

1. Entity Name
ICHING INC.

FILED
Sep 03, 2008 08:00 AM
Secretary of State

Principal Place of Business	Mailing Address
221 SW 21ST ROAD MIAMI, FL 33129 US	221 SW 21ST ROAD MIAMI, FL 33129 US

07312008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-5872980
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☑ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 33612-3425

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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

U00000958800
09/03/08-80003-002 158.75

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
Due by September 12, 2008

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PRES
NAME	GARCIA, MARIA J
STREET ADDRESS	221 SW 21ST ROAD
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	TRES
NAME	GARCIA, RUBEN D
STREET ADDRESS	221 SW 21ST ROAD
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	SECT
NAME	GARCIA, RUBEN D
STREET ADDRESS	221 SW 21ST ROAD
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	DIR
NAME	GARCIA, RUBEN D
STREET ADDRESS	221 SW 21ST ROAD
CITY-ST-ZIP	MIAMI, FL 33129
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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: _____ 7/30/08 DIRECTOR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #