


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 29, 2004 8:00 am
Secretary of State

06-29-2004 90001 029 ****61.25

DOCUMENT # P20400 1. Entity Name HONG KONG TRADE DEVELOPMENT COUNCIL, INC.	
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Principal Place of Business 219 EAST 46TH STREET NEW YORK, NY 10017-2951	Mailing Address 219 EAST 46TH STREET NEW YORK, NY 10017-2951
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54059172



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

03202003 Chg-NP CR2E037 (10/03)

4. FEI Number 13-3496835	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent PRENTICE-HALL CORPORATION SYSTEM, INC. 1201 HAYS STREET TALLAHASSEE, FL 32301		7. Name and Address of New Registered Agent	
		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		Zip Code	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by September 8, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CHIU, ROBIN 219 E 46TH ST 2ND FL NEW YORK, NY 10017 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P STEPHEN CHE KEUNG WONG 219 EAST 46TH ST 2ND FL NEW YORK, NY 10017 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS HO, LOUIS 110 NORTHAMPTON DR HOLMDEL, NJ 07733 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CHOW, JACQUELINE 336 COZZENS COURT EAST BRUNSWICK, NJ 08816 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SZE, MICHAEL SOUTH BAY TOWERS, APT 12B HONG KONG, OC 59 s bay <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR WONG, ALAN 38 F OFFICE TOWER CONVENTION PLAZA 1 HARBOUR RD WANCHAI, HONG KONG <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAM, FREDERICK 16 GUILDFORD RD THE PEAK HONG KONG, CH <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR LAI, ANNA 38 F OFFICE TOWER CONVENTION PLAZA 1 HARBOUR RD WANCHAI, HONG KONG <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 617, 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: Jackie (Chiu) 6/25/2004 (212) 838-8688
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #