

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 14, 2005 08:00 AM
Secretary of State

DOCUMENT # P93000031647

1. Entity Name
CTS INVESTMENT INC. USA



Principal Place of Business
**7980 W IRLO BRONSON MEMORIAL HWY.
KISSIMMEE, FL 34747 US**

Mailing Address
**7980 W IRLO BRONSON MEMORIAL HWY
KISSIMMEE, FL 34747 US**



04112005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3178502

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

**BOCHUN, LIN
3000 SPLENDID CHINA BLVD
KISSIMMEE, FL 34747**

**DO NOT WRITE
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

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, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO LIN, BOCHUN 3000 SPLENDID CHINA BLVD. KISSIMMEE, FL 34747
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHEN, SHOUJIE CTS HOUSE, 78-83 CONNAUGHT RD. C HONG KONG,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MIAO, ZHUANG CTS HOUSE, 78-83 CONNAUGHT RD. C HONG KONG,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZHANG, FENG CHUN CTS HOUSE, 78-83 CONNAUGHT RD. C HONG KONG,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DU, XINJIAN 78-83 CONNAUGHT RD CTS HOUSE HONG KONG,
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LAI, JOHN K VP 7980 W IRLO BRONSON HWY KISSIMMEE, FL 34747

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bochun Lin

Date

4/8/05

Daytime Phone #

407-397-8816