## 2000 UNIFORM BUSINESS REPORT (UBR)

2000 L	JNIFORM BUSI	APPROVE	.D					
DOCUMENT # <b>P9300064738</b> 1. Entity Name					FILED			
26 ACRE LAND CO., INC.			s 1.	. ,	00 OCT -6 PM	կ։ կ9		
Principal Place of 6	Businaan		<del></del>		SECRETARY OF	STATE		
Principal Place of Business Mailing Address					SECRETARY OF TALLAHASSEE, F	LORIDA		
		3000 SPLENDID CHINA BLVD KISSIMMEE FL 34747		, ,===				
					1 18814881 410 18106 11414 8844 88141 81	Afil odna dnei dian iott	1 <b>0</b> 181 <b>0</b> : 1011 1001	
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		LINSTATEME				
City & State		City & State			4. FEI Number 59-3201293		Applied For Not Applicable	
Zip	Country	Zíp	Country		5. Certificate of Status Desired	\$8.75 Ac Fee Requir		
6.	. Name and Address of Current F	legistered Agent			7. Name and Address of New Regi	stered Agent		
VANO	OHANO		Name	CAC	O, XIAO NING			
YANG, GUANG 3000 SPLENDID CHINA BLVD			Street Address (P.O. Box Number is Not Acceptable)					
KISSIMMEE FL 34747								
City K				Kis	SIMMEZ	FL Zip S	2 X	
8. The above name	ed entity submits the statement for	He purpose of changing its re	gistered office o	registere		)001008	-013	
SIGNATURE Signat	ture. Whed or printed name of registe <del>red as a training</del>	nd title if applicable (NOTE: R	legistered Agent signat	ure required	***3793	1.75 ****( DATE	<u>758.75</u>	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)  FILE NOW!!! F After SEPTEMBER 13, 20 Make Check Payable to			2000 Mln. will	be \$750			00 May Be ed to Fees	
11.	OFFICERS AND D	DIRECTORS	12.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTOR		
TITLE D		☐ Delete	TITLE	P		☐ Change	Addition	
	HU, YUENING		NAME STREET ADDRESS	ME	N SHOU JIZ HOUSE, 78-83 CONNAUG	47 RD.	_	
	000 Spendid China Blvd. SSIMMEE FL 34747		CITY-ST-ZIP	1-101	NG KONG	,,,		
TITLE PS		X Delete	TITLE	72.		☐ Change	Addition	
	ang, guang	•	NAME	MIL	to 2HUANG			
	000 SPENDID CHINA BLVD.	,	STREET ADDRESS CITY-ST-ZIP		HOUSE, 78-83 CONNA	WHI RD.	<	
TITLE	SSIMMEE FL 34747	□ Delete	TITLE	Hio.	ng Kong	Change	Addition	
NAME		CT Osieré	NAME	79. 242	NO FEND CHUN	C Criange	(Andamon	
STREET ADDRESS			STREET ADDRESS	CT5	HUUSE 78-83 COUNA	UGHT RD.	<i>C</i>	
CITY-ST-ZIP			CITY-ST-ZIP	401	NG FENG CHUN HOUSE, 78-83 CONNA NG KONG			
TITLE		☐ Detete	TITLE	(T)	•		Addition	
NAME STREET ADDRESS			NAME STREET ADDRESS	CAO	.XIAO NING	PWD		
CITY-ST-ZIP			CITY-ST-ZIP	300	.XIAO NING O GOLENDIO CHIMA SIMMEZ, FL 34	シャコ		
TITLE		☐ Delete	TITLE	1		☐ Change	☐ Addition	
NAME STREET ADDRESS			NAME OTREE ADDRESS					
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP		•			
TITLE		☐ Delete	TITLE	-		☐ Change	☐ Addition	
NAME			NAME					
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP					

SIGNATURE RECORNESTOR SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER ORDINACTOR Daytime Phone #

KE

13. I hereby certify that the information supplied with this filling 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 607. Florida Statutes, and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: