2006 FOR PROFIT CORPORATION ANNUAL REPORT

Feb 24, 2006 08:00 AM **Secretary of State DOCUMENT # P93000081667** 1. Entity Name TAI WAH, INC. Mailing Address Principal Place of Business FU WING CHINESE RESTAURANT 4784 N CONGRESS AVENUE FU WING CHINESE RESTAURANT 4784 N. CONGRESS AVENUE LANTANA, FL 33462 US LANTANA, FL 33462 US 02082006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0471595 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 5. Name and Address of Current Registered Agent RONG-SONG, MEI DO NOT WRITE **4742 ARTHUR STREET** PALM BEACH GARDENS, FL 33418 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 \$5.00 May Be 5. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ΩP TITLE MEI. RONG SONG NAME 7553 COLONY LAKE DRIVE STREET AOURESS CRY-ST-ZIP BOYNTON BEACH, FL 33436 TITLE 1100000446589 NAME 03/08/06 80019-012 150.**0**0 STREET ADDRESS CITY-ST-ZIP MLE NAME STREET ADDRESS DO NOT WRITE City-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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 frue 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS CITY-ST-DP

PRESIDENT

02/17/06

(561) 434-5990

FILED