


2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # P93000087187	
1. Entity Name CTS INTERNATIONAL INC. USA	

Principal Place of Business 7980 W IRLO BRONSON HWY KISSIMMEE, FL 34747 US	Mailing Address 7980 W IRLO BRONSON HWY KISSIMMEE, FL 34747 US
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04112005 No Chg-P CR2E034 (10/03)

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4. FEI Number 59-3215006	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BOCHUN, LIN 3000 SPLENDID CHINA BLVD. KISSIMMEE, FL 34747

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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.

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. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE	D
NAME	LIN, BOCHUN
STREET ADDRESS	7883 CONNAUGHT RD CTS HOUSE
CITY-ST-ZIP	HONG KONG,
TITLE	D
NAME	CHEN, SHOU JIE
STREET ADDRESS	CTS HOUSE, 78-83 CONNAUGHT RD. C
CITY-ST-ZIP	HONG KONG,
TITLE	D
NAME	MIAO, ZHUANG
STREET ADDRESS	CTS HOUSE, 78-83 CONNAUGHT RD. C
CITY-ST-ZIP	HONG KONG,
TITLE	D
NAME	ZHANG, FENG CHUN
STREET ADDRESS	CTS HOUSE, 78-83 CONNAUGHT RD. C
CITY-ST-ZIP	HONG KONG,
TITLE	D
NAME	DI, XINJIAN
STREET ADDRESS	3000 SPLENDID CHINA BLVD.
CITY-ST-ZIP	KISSIMMEE, FL 34747
TITLE	VP
NAME	LAI, JOHN K
STREET ADDRESS	7980 W. IRLO BRONSON MEMORIAL HWY
CITY-ST-ZIP	KISSIMMEE, FL 34747

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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 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: Bochun Lin 4/18/05 407-397-8816
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #