

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 17 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000009170 (8)

1. Corporation Name

SKY INDUSTRY TECHNOLOGY CORPORATION



Principal Place of Business

Mailing Address

8820 FONTAINEBLEAU BLVD #205
MIAMI FL 33172

8820 FONTAINEBLEAU BLVD #205
MIAMI FL 33172

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

21 7330 SW, 82nd

Suite, Apt. #, etc.

22 # B216

City & State

23 Miami, FL

Zip

24 33143

Country

25 U.S.A

2a. Mailing Address

26 7330 SW, 82nd

Suite, Apt. #, etc.

27 # B216

City & State

28 Miami, FL

Zip

29 33143

Country

30 U.S.A

3. Date Incorporated or Qualified

02/03/1995

4. FEI Number

65-0553854

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

LIU, QING
8820 FONTAINEBLEAU BLVD #205
MIAMI FL 33172

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME P
WANG, LIQUN
STREET ADDRESS 8820 FONTAINEBLEAU BLVD #205
CITY-ST-ZIP MIAMI FL 33172

TITLE ☐ DELETE

NAME V
CHAO, XIAO JUN
STREET ADDRESS 8820 FONTAINEBLEAU BLVD #205
CITY-ST-ZIP MIAMI FL 33172

TITLE ☐ DELETE

NAME VP
ZHOU, KAIXUAN
STREET ADDRESS 8820 FONTAINEBLEAU BLVD #205
CITY-ST-ZIP MIAMI FL 33172

TITLE ☐ DELETE

NAME S
QING, LIU
STREET ADDRESS 8820 FONTAINEBLEAU BLVD #205
CITY-ST-ZIP MIAMI FL 33172

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Qing Liu

04/02/98 130522432782

CP2E034 (10/97)