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PROFIT CORPORATION **ANNUAL REPORT**

1998

CITY-ST-ZIP



ELORIDA DEPARTMENT DE STATE

FILED

Apr 27 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P95000010209 (1)

T&K GUANG XIN ENTERPRISES LTD., INC.

Principal Place of Business Mailing Address 140 COASTLINE RD 140 COASTLINE RD SANFORD FL 32771 SANFORD FL 32771 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/07/1995 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 59-3304329 Not Applicable 26 21 Suite, Apt. #, etc Suite, Apl. #, etc. \$8.75 Additional Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 24 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 BEANCA, LAI Wel 140 COASTLINE RD Street Address (P.O. Box Number is Not Acceptable) 82 SANFORD FL 32771 83 City SAN FORD Zip Code A4 32771 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. 4/15/98 SIGNATURE registered agent and fine if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12. DELETE 1.1 TITLE TITLE YUDONG ZHANG YUDONG ZHANG 1.2 NAME NAME 140 COASTUNE PA **362 DEVON PLACE** 1.3 STREET ADDRESS STREET ADDRESS HEATHROW FL 1.4 CITY-ST-ZIP SANFORD FL 32771 CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 C(TY - ST - Z(P CITY-ST-ZIP Change Addition DELETE TITLE 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ DELETE 61 TITLE TITLE 62 NAME NAME 63 STREET ADDRESS STREET ADDRESS

14. 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.