2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 17, 2006 08:00 AM Secretary of State

1. Entity Na	MENT # P950000167	00			Secre	tary or s	state
Principal Pla	ce of Business	Mailing Address		7			
9446 PHILL	IPS HWY,	9446 PHILLIPS HWY.					
SUITE 8	LE, FL 32256	SUITE 8 IACKSONVILLE, FL 32256					
INCUSORATE	LE, FL 32200	THCHOONVICEE, FC 32206			TE (ERIEL EUR) EERN EERN EERN EER	(1 0.5 /5) (1 5/0 5 /6) (50 0) (60	K REKER K (88)
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	OO NOT WRITE	N THIS SPA	CE	`` -			Applied For
				4. FEI Numb		—	Not Applicable
			LK arki		of Status Desired		Additional
	6. Name and Address of Current Reg	Natural Arest		4		Fee Req	ulred
	E. House and House of Content (Co.	Tistelen vilait	1.3 : .	•			
YEN, KUNG-PO			La diregr	ກດ	NOT W	RITE	•
	9446 PHILIPS HWY STE 8 JACKSONVILLE, FL 32256				1일 : 그 그림	saftyf af af 27	
0/10/100/	17/662,72 32200			IN	THIS SF	ACE	
				in . Name of the second	and the second second		***
6. The above the obliga SIGNATURE	e named entity submits this statement for the tilions of registered agent. Signature, typed or printed name of registered agent and to		rad office or regist		th, in the State of Flo	rida I am familiar w	ith, and accept
	Signature, typed of presentative of regimened agent and r	ine i applicable. INOTE: Register	ed Agera agnatura raqua	ed when revisianny)		UATE	· <u>-</u>
Fil After M	E NOWIII FEE IS \$150.00 lay 1, 2008 Fee will be \$550.00	Election Campaign Fina Trust Fund Contribution		5.00 May Be Ided to Fees	04/29/06-	511284 80045-003	150.00
10.	OFFICERS AND DIR	ECTORS (
TITLE NAME	DPS YEN, KUNG-PO	-					
STREET ADDRESS	9446 PHILIPS HWY #8	-	1				
CiTY-ST-ZIP	JACKSONVILLE, FL 32256						
TOTICE	DVT		1	: .			
MAME	YEN, KUNG-TI		:	*. *	# * *		
STREET ADDRESS CATY-ST-ZIP	9446 PHILIPS HWY #8		I	,	1 deleter Volumente e		
	JACKSONVILLE, FL 32256		-				
TITLE NAME			1			•	
STREET ADDRESS			1 .	-	NAT 141	Just I with hour	
CITY-ST-ZIP	1		•	DO	NOT W	KIIE	
TITLE			1	INI .	THIS SF	ACE	
NAME	1		,··		1 I H.S. SE	70L	

12. Thereby certify that the information supplied with this filing 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 true and accurate and that my signature shall have the same legal affect 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:

NAME STREET ADORESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 3477 NAME STREET ADDRESS City-S1-209

SIGNATURE AND THE OR PRINTED NAME OF SIGNING OFFICE PURE STEEL NT

KUNG-PO YEN

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