## FILED Feb 16, 2006 8:00 am Secretary of State 02-16-2006 90030 032 \*\*\*150.00

2006 FOR PROFIT CORPORATION ANNUAL REPORT

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DOCUMENT # P95000039132												
1. Entity Name HANG SENG NO. 1, INC.												
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Principal Place of Business Mailing Address								1	C	80109	10	!
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ORLANDO, F	RLANDO, FL 32837						١ <sub>,</sub> , ,	. (				
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.			S	Suite, Apt. #, etc.				01132006	S Chg-P	CR2	E034 (11/05)	
City & State			(	City & State				4. FEI Num		· · · · · · · · ·	}	oplied For
Zip	Country			Zip Couri				59-3316815   Not Applie  5. Certificate of Status Desired   \$8.75 Additional				ditional
	6 Name	and Address of Cu	root Boole	torad Agant	<u>.</u>	T	<u> </u>	<del> </del>	nd Address of N	=	Fee Require	d
6. Name and Address of Current Registered Agent Nam								7. Name a	iu Address of A	iew Registere	a Agent	
ZHANG, WAN-							ddrags (	P ∩ Boy Num	ber is Not Acce	orable)		
12317 S. ORANGE BLOSSOM TRAIL ORLANDO, FL 32837						Slieet A	iddi ess (	F.O. BOX NON	ibei is Not Accei	Jiable)	<del></del>	
						City				F	Zip Cod	e
8. The above	named entit	y submits this stateme	ent for the p	urpose of changing its	register	red office o	r register	red agent, or t	ooth, in the State			and accept
, the obligat	tions of regist	tered agent.										
SIGNATURE.												
Signature Typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when roundating)  DATE												
FILE NOW!!! FEE IS \$150.00 9. Electron Campaign Financing \$5.00 May Re												
		6 Fee will be \$5		Trust Fund Cont	ribution.		Add	ed to Fees				
10.		OFFICERS	AND DIREC	TORS	11.			ADDITION	S/CHANGES TO	OFFICERS A		S IN 11
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12. I hereby certify that the information supplied with this filling does not quality 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 effect as if made under oath; that I am an officer or direction 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.												
SIGNAT	URE <b>⊴</b>			rilan	_	er-	1		1/13/0	L		
		SIGNATURE AND TYPE	O OR PRINTED	NAME OF SIGNING OFFICER	OR DIREC	TOR			Date		Daytime Phone #	