

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 02, 2000 8:00 am
Secretary of State

03-02-2000 90007 004 ***150.00

DOCUMENT # P95000090214

1. Entity Name
TRANS CENTURY CO., INC.

Principal Place of Business 777 N.W. 72ND AVENUE SUITE 2D15 FL 33126	Mailing Address 777 N.W. 72ND AVENUE SUITE 2D15 MIAMI FL 33126-3014
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 777 N.W. 72nd Ave. Suite, Apt. #, etc. 2D15	3. Mailing Address 777 N.W. 72nd Ave Suite, Apt. #, etc. 2D15
City & State Miami FL	City & State Miami FL
Zip 33126	Country DADE

4. FEI Number 65-0687561	Applied For <input checked="" 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
**ZOU, JIAN QIN
 150 NW 24 COURT
 MIAMI FL 33125**

7. Name and Address of New Registered Agent

Name ZOU, JIANQIN
Street Address (P.O. Box Number is Not Acceptable) 3412 N.W. 78th TERRACE
City HOLLYWOOD FL
Zip Code 33024

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.

SIGNATURE Jianqin Zou DATE 2/15/2000

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>	FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD ZOU, JIANQIN 150 N.W. 24 COURT MIAMI FL 33125 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD ZOU, JIANQIN 3412 N.W. 78th TERRACE HOLLYWOOD FL 33024 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Jianqin Zou DATE 2/15/2000 DAYTIME PHONE # (305) 264-1913

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)