


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2008 8:00 am
Secretary of State

05-21-2008 90019 035 ***150.00

DOCUMENT # P96000032061

1. Entity Name
SENAO INTERNATIONAL (MIAMI), INC.



Principal Place of Business
2604 NW 72ND AVENUE
MIAMI, FL 33122 US

Mailing Address
2604 NW 72ND AVENUE
MIAMI, FL 33122 US

50005616

2. Principal Place of Business - No P.O. Box #
2100 NW 99th Ave
 Suite, Apt. #, etc.

3. Mailing Address
2100 NW 99th Ave
 Suite, Apt. #, etc.



05052008 Chg-P CR2E034 (12/06)

City & State
Doral, FL

City & State
Doral, FL

Zip
33172 Country
USA

Zip
33172 Country
USA

4. FEI Number
65-0673438

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
CHOU, INFFINIE
2604 NW 72ND AVENUE
MIAMI, FL 33122

7. Name and Address of New Registered Agent
 Name
Leo, Meng Chee
 Street Address (P.O. Box Number is Not Acceptable)
2100 NW 99th Ave
 City
Doral **FL** Zip Code
33172

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **MENG CHEE LEO** DATE **15 May '08**

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

FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WANG, SHANSHAN 2604 NW 72ND AVENUE MIAMI, FL 33122	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIN, PAO YUNG 2604 NW 72ND AVENUE MIAMI, FL 33122	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M LEO, MENG CHEE 2604 NW 72ND AVENUE MIAMI, FL 33122	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M CHOU, Shang-Te 2100 NW 99th Ave Doral, FL 33172	<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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	2100 NW 99th Ave Doral, FL 33172	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2100 NW 99th Ave Doral FL 33172	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2100 NW 99th Ave Doral FL 33172	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **MENG CHEE LEO** Date **15 May '08**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR