FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P9600093285

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED May 08, 1999 8:00 am Secretary of State

05-08-1999 90070 003 ***150.00

MUNDO	INTERNATIONAL TRADING	CO., INC.					
Principal Place of Business Mailing Address					P IDENIOON IN THAT IN AND AND A BOAR OR HIS BOAR		
4995 N W 79TH AVE P O BOX 113305 118 MIAMI FL 33166 US					DO NOT WRITE IN	N THIS SPACE	
US					11/12/1996		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	A	oplied For
	59 N.W 72 Ave 26				59-3409575	No	ot Applicable
Suite, Apt.	ot. #, etc. Suite, Apt. #, etc.				5. Certifcate of Status Desired	****	Additional equired
City & State	. —				6. Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip 3316	Country	Zip	Country	′	This corporation owes the current y Personal Property Tax.	rear Intangible	□No
24 3316	9. Name and Address of Current Registered Agent		30		10. Name and Address of New Regis		
9. Name and Address of Current Registered Agent				Name	in the same of the		
	O, DE FANG		82	Street Add	dress (P.O. Box Number is Not Acceptable)		
8041 LAKE DR #202			02	Street Add	bless (F.O. box Number is Not Acceptable)		
MIAM	II FL 33166		83				
			84	City		FL 85 Zip	Code
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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
TITLE	Р	DELETE 1.1 TI			P.	(X) Change	☐ Addition
NAME	7 IE 1, 40 / 11 / 2 / 1		1.2 NAME		SHAO, DE FANG		
STREET ADDRESS				,	8041 LAKE Dr. 201		
CITY-ST-ZIP TITLE	MIAMI FL V	☐ DELETE	1.4 CITY-1 2.1 TITLE	51-ZIP	MIAMI FL	Change	Addition
NAME			2.2 NAME		Li, Rui Yvan	-	
STREET ADDRESS			2.3 STREE	T ADDRESS	4140 N.W. 79th Ave		
CITY-ST-ZIP	MIAMI FL. 2.40		2. 4 CITY-	ST-ZIP	MIAMI, FL	 	
TITLE			3.1 TITLE	1		☐ Change	Addition
NAME			3.2 NAME				
STREET ADDRESS				TADDRESS			
CITY-ST-ZIP			34. CITY-	\$T-ZIP		☐ Change	Addition
TITLE			4,1 111LE 4,2 NAME			_ c.iaige	
NAME				T ADDRESS]
STREET ADDRESS	1		4.4 GITY-1				
CITY-ST-ZIP TITLE			5.1 TITLE			☐ Change	Addition
NAME	_		5.2 NAME				
STREET ADDRESS			5.3 STREE	TADDRESS			-
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE			6.1 TITLE			☐ Change	☐ Addition
HAME			6.2 NAME	- 1			

14. 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 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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP