

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2005 8:00 am
Secretary of State

03-31-2005 90047 047 ***150.00

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03222005 Chg-P CR2E034 (10/03)

DOCUMENT # P97000003608																											
1. Entity Name SHING LEE, INC.																											
Principal Place of Business 3580 ALOMA AVE SUITE 5 WINTER PARK, FL 32789			Mailing Address 3580 ALOMA AVE SUITE 5 WINTER PARK, FL 32789																								
2. Principal Place of Business 385 COMMERCE WAY Suite, Apt. #, etc.		3. Mailing Address 385 COMMERCE WAY Suite, Apt. #, etc.																									
City & State LONGWOOD, FL Zip 32750		City & State LONGWOOD, FL Zip 32750		4. FEI Number 59-3419995																							
Country SEMINOLE		Country SEMINOLE		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																							
6. Name and Address of Current Registered Agent TRAN, LUONG M 3580 ALOMA AVE SUITE 5 WINTER PARK, FL 32789			7. Name and Address of New Registered Agent Name: RAMSEY W. DULIN, ESQ. Street Address (P.O. Box Number is Not Acceptable): 201 E. PINE STREET SUITE 425 City: ORLANDO FL 32801																								
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: <i>[Signature]</i> DATE: 3/22/05																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees																								
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																								
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																											
SIGNATURE: <i>[Signature]</i>			PRESIDENT																								
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date: 407/830-5338																								