


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 27, 2006 8:00 am**  
**Secretary of State**


02-27-2006 90060 024 \*\*\*150.00

DOCUMENT # P97000036958	
1. Entity Name LILY & HUANG CORPORATION	

Principal Place of Business 815 DONALD ROSS ROAD JUNO BEACH, FL 33408	Mailing Address 815 DONALD ROSS ROAD JUNO BEACH, FL 33408
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**DO NOT WRITE IN THIS SPACE**

400100



01062006 No Chg-P CR2E034 (11/05)

4. FEI Number 69-0747399	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LIANG, JIE  
815 DONALD ROSS RD  
JUNO BCH, FL 33408

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

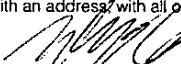
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006, Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHEN, ZHENQUAN 252 SAN REMO DR JUPITER, FL 33458
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIANG, JIE 252 SAN REMO DR JUPITER, FL 33458
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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:**  **ZHENQUAN CHEN** 2/13/08 561-624-0700

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #