

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2005 8:00 am
Secretary of State

01-12-2005 90012 022 ***150.00

DOCUMENT # P97000072694			
1. Entity Name PING'S COMPANY			
Principal Place of Business 5530 W. OAKLAND PARK BLVD. LAUDERHILL, FL 33313		Mailing Address 5530 W. OAKLAND PARK BLVD. LAUDERHILL, FL 33313	
2. Principal Place of Business 9900 S. GRAND DUKE CIRCLE Suite, Apt. #, etc.		3. Mailing Address 9900 S. GRAND DUKE CIRCLE Suite, Apt. #, etc.	
City & State TAMARAC, FL Zip 33321 Country		City & State TAMARAC, FL Zip 33321 Country	
4. FEI Number 65-0776594		Applied For <input 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 LAU, PING S 611 E. EVANSTON CIRCLE FORT LAUDERDALE, FL 33312		7. Name and Address of New Registered Agent Name <u>STEPHEN LAU</u> Street Address (P.O. Box Number is Not Acceptable) 9900 S. GRAND DUKE CIRCLE City <u>TAMARAC</u> <u>FL</u> Zip Code <u>33321</u>	
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 <u>[Signature]</u> DATE <u>1/7/05</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE D NAME KWOK, OI YEE <input checked="" type="checkbox"/> Delete STREET ADDRESS 5530 W. OAKLAND PARK BLVD. CITY-ST-ZIP LAUDERHILL, FL 33313	TITLE P NAME STEPHEN LAU <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition STREET ADDRESS 9900 S. GRAND DUKE CIRCLE CITY-ST-ZIP TAMARAC, FL 33321		
TITLE D NAME YIU, LAI H <input checked="" type="checkbox"/> Delete STREET ADDRESS 5530 OAKLAND PARK BLVD CITY-ST-ZIP FORT LAUDERDALE, FL 33313	TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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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: <u>[Signature]</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>1/7/05</u> Daytime Phone # <u>305-937-2272</u>	

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01052005 Chg-P CR2E034 (10/03)