

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000075711

FILED
Apr 28, 2008
Secretary of State

Entity Name: HO PROSPERITY U.S.A. INC.

Current Principal Place of Business:

7845 NW 57 STREET
MIAMI, FL 33166

New Principal Place of Business:

Current Mailing Address:

7845 NW 57 STREET
MIAMI, FL 33166

New Mailing Address:

FEI Number: 65-0778076

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HO, MINYING
5750 W 20TH CT
HIALEAH, FL 33016 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HO, JASON
Address: 7845 N W 57 STREET B
City-St-Zip: MIAMI, FL 33166

Title: VP () Delete
Name: HO, MINYING
Address: 5750 W 20TH CT
City-St-Zip: HIALEAH, FL 33016

Title: S () Delete
Name: HO, MINYU
Address: 5750 W 20TH CT
City-St-Zip: HIALEAH, FL 33016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MINYING HO

VP

04/28/2008

Electronic Signature of Signing Officer or Director

Date