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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

4000

## FILED May 13, 1999 8:00 am Secretary of State 05-13-1999 90046 002 \*\*\*150.00

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1999	CORPORATIONS	03-13-1999 9004	10 002 11 130.00
DOCUMENT # P97000100365			
HUAYUAN, INC.		5 4 9 9 9 9 5 49934 · 90046 - 2	
Principal Place of Business Mailing Address		7	
2608 N. OCEAN BLVD, CALL			
2HML		DO NOT WRITE IN THIS	SPACE
Fon PANO BEACH FL 33062 Principal Place of Business   2a. Mailing Address		3. Date Incorporated or Qualifed	997
2. Principal Place of Business 2a. Mailing Address		4. FEI Number	Applied For
26     Suite, Apt. #, etc.   Suite, Apt. #, etc.		65-0796488	Not Applicable
Suite, Apr. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State City & State		6. Election Campaign Financing	\$5.00 May Be
28		Trust Fund Contribution	Added to Fees
Zip Zip Zip Zip Zip Zip	Country 30	This corporation owes the current year In     Personal Property Tax.	tangible
9. Name and Address of Current Registered Agent	301	10. Name and Address of New Registered	
	81 Name		
LI, SHANG ZHAN	82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
2608 N. OCEAN BLVD.			
POMPANO BEACH, FL 33062	83		
Tourish o beneft, FL 19002	84 City	FL	85 Zip Code
1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statute	es, the above-named corpo	ration submits this statement for the purpose of	changing its registered
office or registered agent, or both in the State of Florida. Such change was at agent. I am familiar with, and accept the obligations of, Section 607.0505, Flor	thorized by the corporation	n's board of directors. I hereby accept the appoi	ntment as registered
SIGNATURE (X) Shaway Shaw	5-	4/26/9	29
Signature, typed or printed name of registered agent and title if applicable, (NOTE.	Registered Agent signature required		ND DIRECTORS IN 12
THE P. OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
AME LI, SHANG ZHAN	1.2 NAME		
TREET ADDRESS 2608 N. OCEAN BLVD.	1.3 STREET ADDRESS		700
MY-ST-ZIP POMPANO BCH. FL 33062	1.4 CITY-ST-ZIP		
TLE V.P. DELETE	2.1 TITLE		☐ Change ☐ Addition C
MO. YAO HUA	2.2 NAME		
TREET ADDRESS 2608 N. OCEAN BLV D.	2.3 STREET ADDRESS		
MY-ST-ZIP POMPANO BCH , FL 33062	2, 4 CITY-ST-ZIP		☐ Change ☐ Addition
	3.1 TITLE		☐ Change ☐ Addition
AME	3.2 NAME		
ITY-ST-ZIP	3.4. CITY-ST-ZIP		
TLE DELETE	4.1 TITLE		☐ Change ☐ Addition
AME	4, 2 NAME		
TREET ADDRESS	4 3 STREET ADDRESS		
ITY-ST-ZIP	4.4 CITY-ST-ZIP		Change Cladition
TILE DELETE	5.1 TITLE 5.2 NAME		☐ Change ☐ Addition
AME TREET ADDRESS	5.3 STREET ADDRESS		
ITY-ST-ZIP	5.4 CITY-ST-ZIP		
TLE DELETE	6.1 TITLE		☐ Change ☐ Addition
AME	62 NAME		
TREET ADDRESS	6.3 STREET ADDRESS		
	6.4 CITY, ST. ZID		

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 office 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 of an attachment with an address, with all other like empowered.