**FILED**
**Mar 29, 2006 8:00 am**
**Secretary of State**
03-29-2006 90157 001 ***300.00

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000017279

1. Entity Name
HARBOUR PLAZA PURCHASING INC.

66007534

| Principal Place of Business | Mailing Address |
|---|---|
| 20803 BISCAYNE BLVD.<br>400<br>AVENTURA, FL 33180 | 20803 BISCAYNE BLVD.<br>400<br>AVENTURA, FL 33180 |

01062006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mail-in filing)

**FILE NOW!!! FEE IS $150.00**
**After May 1, 2006 Fee will be $550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | D |
| NAME | CHOW, SUSAN |
| STREET ADDRESS | 10 HARCOURT ROAD, 22ND FLOOR |
| CITY ST ZIP | HONG KONG, |
| TITLE | DP |
| NAME | LAI, DOMINIC |
| STREET ADDRESS | 10 HARCOURT ROAD, 22ND FLOOR |
| CITY ST ZIP | HONG KONG, |
| TITLE | DT |
| NAME | KOH, P C |
| STREET ADDRESS | 10 HARCOURT ROAD, 22ND FLOOR |
| CITY ST ZIP | HONG KONG, |
| TITLE | DS |
| NAME | SHIH, EDITH |
| STREET ADDRESS | 10 HARCOURT ROAD, 22ND FLOOR |
| CITY ST ZIP | HONG KONG, |
| TITLE | DVP |
| NAME | CHOW, RAYMOND |
| STREET ADDRESS | 10 HARCOURT ROAD, 22ND FLOOR |
| CITY ST ZIP | HONG KONG, |
| 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 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: Poh Kham Koh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date