2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

	ANNUAL	REPORT (A	H()	Mar 08 1	<b>2006 08:00</b> A	A M
DOCU 1. Entity Nam	MENT # P9800003	2374			ary of State	-XIVI
XG LIN C	CORPORATION					
Principal Plac	ce of Business	Mailing Address				
901 21ST STREET VERO BEACH FL 32960		901 21ST STREET VERO BEACH FL 32960				
2. Principal F	Place of Business	3. Mailing Address			3300 2101 13102 (US 1855 (US 1814 1 1 1	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		1st MOORE	CR2E034 (10/05)	
City & State		City & State		4. FEI Number 65-0826040 Applied For Not Applied		
Zip	Country	Zip	Country	5. Certificate of Status Desire	\$9.75 Add	itional
	6. Name and Address of Curr	rent Registered Agent	<del></del>	7. Name and Address of Ne	•	•
			Name	. <del></del>		
190	, XIANG GAN 16 18TH AVENUE RO BEACH FL 32960		Street Addre	ss (P.O. Bax Number is Not Accept	able)	
			Cny	· · · · · · · · · · · · · · · · · · ·	FL Zip Code	!
8. The above the obligat	a named entity submits this stateme tions of registered agent.	nt for the purpose of changing	its registered office or regi	stered agent, or both, in the State o	f Florida. I am familiar with, a	and acc
SIGNATURE.		example and total distribution of the	OTE Board and Agget const.	and the property of the land	DATE.	
	Signature, typed or printed name of registered a	The second secon	OTE Registored Agent signature req	ured when terretaing)	OATE	
F After	Squeture hyped or printed name of registered of FILE NOW!!] FEE IS \$150,000 May 1, 2006 Fee Will Be \$550 k Payable to Florida Departmen	0.00 nt of State	OTE Registered Agent signature req	9. Election Ca	mpaign Financing \$5.0	O May
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12. Thereby certify that the information supplied with this filing does not quality for the exemptions contained in Section 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 direction 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 1 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: