

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000041978

FILED  
Mar 10, 2008  
Secretary of State

Entity Name: MEILING ACUPUNCTURE & HERB CHINESE MEDICAL CENTER, INC.

## Current Principal Place of Business:

24 SE 4TH ST  
BOCA RATON, FL 33432

## New Principal Place of Business:

240 W. PALMETTO PARK ROAD  
210  
BOCA RATON, FL 33432

## Current Mailing Address:

24 SE 4TH ST  
BOCA RATON, FL 33432

## New Mailing Address:

240 W. PALMETTO PARK ROAD  
210  
BOCA RATON, FL 33432

FEI Number: 65-0840268

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEILIAN, XIA  
24 SE 4TH ST  
BOCA RATON, FL 33432 US

## Name and Address of New Registered Agent:

MEILIAN, XIA  
240 W. PALMETTO PARK ROAD  
210  
BOCA RATON, FL 33432 US

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: MEILIAN XIA

03/10/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: XIA, MEILIAN  
Address: 24 SE 4TH ST  
City-St-Zip: BOCA RATON, FL 33432

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: XIA, MEILIAN  
Address: 240 W. PALMETTO PARK ROAD, #210  
City-St-Zip: BOCA RATON, FL 33432

Title: M ( ) Change (X) Addition  
Name: CHEN, SHAOWEI  
Address: 240 W. PALMETTO PARK ROAD, #210  
City-St-Zip: BOCA RATON, FL 33432

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: MEILIAN XIA

P

03/10/2008

Electronic Signature of Signing Officer or Director

Date