## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

FILED
Jan 12, 2007 08:00 AM
Secretary of State

Principal Place of Business  7757 LAKE WORTH ROAD LAKE WORTH, FL 33467  DO NOT WRITE IN THIS SPACE  Mailing Address  7757 LAKE WORTH ROAD LAKE WORTH, FL 33467  01082007 No Chg-P CR2E034 (11/05)	
DO NOT WRITE IN THIS SPACE  01082007 No Chg-P CR2E034 (11/05)	
65-0874787 Not  5. Certificate of Status Desired \$8.75 Addit Fee Required	olled For Applicable lional
LI, WAI W 7757 LAKE WORTH ROAD LAKE WORTH, FL 33467  DO NOT WRITE IN THIS SPACE	
The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Florida. I am familiar with, a the obligations of registered agent.  SIGNATURE  Signature typed or printed name of registered agent and title if applicable  (NOTE Registered Agent signature required when refinataling)  DATE  OF Control of the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, a the obligations of registered agent, or both, in the State of Florida. I am familiar with, a the obligations of registered agent.  Signature typed or printed name of registered agent and title if applicable  (NOTE Registered Agent signature required when refinataling)  DATE	nd accept
FILE NOW!!! FEE IS \$150.00  After May 1, 2007 Fee will be \$550.00  9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.   Added to Fees	
10. OFFICERS AND DIRECTORS  TITLE D  NAME LI, WAI W  STREET ADDRESS 7757 LAKE WORTH ROAD  CITY-ST-ZIP LAKE WORTH, FL 33467 (100000583959)  TILE 01/12/07-80018-007 15	0.00
STREET ADDRESS OTTY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WDITE	000000000000000000000000000000000000000
TITLE NAME STREET ADDRESS CITY-ST-78P  IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	
STREET ADDRESS CITY-ST-7IP  12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, I further certify that the infinitionated 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 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 the changed, or on an attachment with an address, with all other like empoyered.	formation or director