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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # PORODIOGEO2

1. Corporatio W & W T	RADING COMPANY, INC.					
Principal Place of Business Mailing Address						[\$881 881 310 (\$101 (BIL)) BB()) BB()] BB()] BB()
050 N.W. 28TH STREET, #121 9050 N.W. 28TH STREET, #1			121	21		
ORAL SPRING		CORAL SPRINGS FL 33065				DO NOT WRITE IN THIS COACE
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed
2. Principal Place of Business 2a. Mailing Address						12/21/1998 4. FEI Number
z. Principal r	<u> </u>	illing Address			4. FEI Number Applied For Not Applied For Not Applied For	
Suite, Apt.	# etc	Suite, Apt. #, etc.				\$8.75 Additional
_ `	m, oto.	27			5. Certificate of Status Desired Fee Required	
22 City & State		City & State			6. Election Campaign Financing S5.00 May Be	
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip	Соц	ntry		8. This corporation owes the current year Intangible
24	25	29	30	•		Personal Property Tax. Yes No
1	9. Name and Address of Current		11			10. Name and Address of New Registered Agent
·				81	Name	
CHE, LI 9050 N.W. 28TH STREET, #121				20	0	(D.O. D. Mushania Alat Associable)
				82	Street Addr	Address (P.O. Box Number is Not Acceptable)
CORAL SPRINGS FL 33065				83		
				84	City	FL 85 Zip Code
SIGNATURE	Signature, typed or printed name of registered agent			Agen	nt signature require	d when reinstating) DATE ADDITIONAL CHANGES TO OSSIGNED AND DIRECTORS IN 12
12.	OFFICERS ANI	D DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	D	□ DECEIE	1.1 11			
NAME	CHE, U	, t	- 1	1.2 NAME 1.3 STREET ADDRESS		
	9050 N.W. 28TH STREET, #121				i	
CITY-ST-ZIP	CORAL SPRINGS FL 33065			TY-SI	T-ZIP	Change Addition
TITLE	D WILL VINO		2.1 TITLE 2.2 NAME			
NAME	170, 1110					
STREET ADDRESS	00011 0001100 51 0000				FADDRESS	
CITY-ST-ZIP TITLE				T-ZIP	Change Addition	
NAME	D Wang, Yongli					\ \frac{1}{\sqrt{1}}
					ADORESS	·
				3.3 STREET ADDRESS 3.4. CITY-ST-ZIP		
CITY-ST-ZIP TITLE				4.1 TITLE		Change Addition
NAME			4. 2 N			
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			4.4 CI		- 1	<u>.</u>
TITLE	DELETE 5.1T				☐ Change ☐ Addition	
NAME				5.2 NAME		
STREET ADDRESS			5.3 ST	REET	T ADDRESS	!
CITY-ST-ZIP			5.4 CI	TY-ST	T- ZIP	
TITLE		☐ DELETE	6.1 TF	ΠE		Change Addition
NAME			6.2 NA	ME		,
STREET ADDRESS			6.3 ST	REET	ADDRESS	•

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 or the receiver entrustee 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 on ap attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

MEXATORE REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mar 10, 1999 8:00 am Secretary of State

03-10-1999 90194 009 ***150.00