

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000005821

FILED
Jan 06, 2008
Secretary of State

Entity Name: TAI-YANG RESEARCH COMPANY

Current Principal Place of Business:

9112 FARRELL PARK LANE
KNOXVILLE, TN 37922

New Principal Place of Business:

Current Mailing Address:

9112 FARRELL PARK LANE
KNOXVILLE, TN 37922

New Mailing Address:

FEI Number: 58-2605625

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOCOUREK, TODD G
1352 NORTH GADSDEN STREET
TALLAHASSEE, FL 323035668 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P (X) Delete
Name: SHIH, ANN TSWIN
Address: 9112 FARRELL PARK LANE
City-St-Zip: KNOXVILLE, TN 37922

Title: V () Delete
Name: REY, CHRISTOPHER M
Address: 9112 FARRELL PARK LANE
City-St-Zip: KNOXVILLE, TN 37922

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: REY, CHRISTOPHER M
Address: 9112 FARRELL PARK LANE
City-St-Zip: KNOXVILLE, TN 37922

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: CHRISTOPHER M REY

DR

01/06/2008

Electronic Signature of Signing Officer or Director

Date