## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P99000093750**

1. Entity Name
GROVE TRADING DEVELOPMENT, INC.



**FILED** Jan 18, 2008 08:00 AM Secretary of State

Principal Place of Business 1113 S MILITARY TRAIL

Mailing Address

1112 C MILITADY TDAIL

		DEERFIELD BEACH, FL 33442	) )	PROFES TRIGIT REGIST REGIST REGIST	(928) KUN ABING BING				
	O NOT WRITE II	01042008 No Chg-P CR2E034 (11/05)							
	그림 그 중요하다 그 사람이 되는 것 같습니다.		4. FEI Number			Applied For Not Applicable			
	n de la	* W	5. Certificate	of Status Desired		5 Additional equired			
	6. Name and Address of Current Regis		1.		, , , , , , , , , , , , , , , , , , , ,	oquii od			
	ING 108TH WAY D, FL 33076	DO NOT WRITE IN THIS SPACE							
8. The above the obligate SIGNATURE_	named entity submits this statement for the pons of registered agent		ed office or registe	ered agent, or bot	h, in the State of Flo	rida. I am familia	r with, and accept		
	Signature, typed or printed name of registered agent and title	Agent signature require	d when reinstating)		DATE	·			
FIL: After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	cing \$5	.00 May Be ded to Fees						
10.	OFFICERS AND DIREC	CTORS			1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	,			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HO, MEI YING 6212 NW 108TH WAY PARKLAND, FL 33076								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	LAU, PAUL 1113 S MILITARY TRAIL			000000733264 01/18/08-80034-011 150.00					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT W	;			
TITLE NAME STREET ADDRESS CITY-SI-ZIP			e i e e e e e e e e e e e e e e e e e e	IN 7	THIS SP	ACE			
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP					Tenning (Magang)		10		

I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under eath; 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIG	N.	<b>AT</b>	U	R	E
-----	----	-----------	---	---	---

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR