2007 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State **DOCUMENT # S17053** 03-28-2007 90003 044 ***150.00 A. E. G. TRADING COMPANY, INC. Principal Place of Business Mailing Address 1661 EGRET ROAD 1661 EGRET ROAD HOMESTEAD, FL 33035 HOMESTEAD, FL 33035 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01172007 CR2E034 (12/06) City & State City & State 4. FEI Number Applied For 65-0267071 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name TUN, CHEE CHOON Street Address (P.O. Box Number is Not Acceptable) 18999 BISCAYNE BLVD **SUITE 205** N. MIAMI BEACH FL 33180 City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, fyped or printed pages of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. П Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition CHEE CHOON, TUN NAME NAME 1661 EGRET ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HOMESTEAD, FL 33035 CITY-ST-ZIP ☐ Defete TITLE ☐ Change Addition LAI LEE, VONG NAME STREET ADDRESS 1661 EGRET ROAD STREET ADDRESS CITY+ST-ZIP HOMESTEAD, FL 33035 CITY-SY-ZIP me Delete THE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-7IP CITY-ST-ZIP ☐ Delete ☐ Change ■ Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CETY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME STREET ADDRESS STREET ADDRESS City-ST-ZIP CITY-ST-ZIP 12. 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. YEENONG (VICE PRESIDENT. SIGNATURE:

FILED Mar 28, 2007 8:00 am