05-06-1999 90292 024 ***793.75

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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # S63645

FLORIDA SPLENDID CHINA, INC.

| 3000 SPLENDID CHINA KISSIMMEE FL 34747 | | 3000 SPLENDID CHINA KISSIMMEE FL 34747 | | | | | | | _ | |
|---|--|---|--------------------|------------------|--|--------------------------------------|---|--------|------------|------------|
| US | | US | | | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | | 3. | Date Incorporated or Qualifed 06/27/1991 | | | |
| Principal Place of Business Za. Mailing Address | | | | | | | FEI Number | | Ap | plied For |
| 21 | | 26 | | | | | 59-3050852 Not Appli | | | |
| Suite, Apt. # | #, etc. | Suite, Apt. #, etc. | | | | - | | \$8 | .75 △ | dditional |
| 22 | | 27 | | | | 5. | Certifcate of Status Desired | F | ee Re | quired |
| City & State | 9 | City & State | | | | 6. | Election Campaign Financing | \$ | 5.00 | May Be |
| 23 | | 28 | | | | | Trust Fund Contribution | ^ | dded t | o Fees |
| Zip | Country Zip | | | Country | | | This corporation owes the current year In | angibl | е | ! |
| 24 | 25 | 29 | 30 | | | | Personal Property Tax. | X Y | es | □No |
| 9. Name and Address of Current Registered Agent | | | | | 10. Name and Address of New Registered Agent | | | | | |
| | | | | 81 | Name | | | | | |
| YANG, GUANG | | | | 82 | Street Ad | drace (P | O. Box Number is Not Acceptable) | | | |
| 3000 | | | 62 Street Add | | | .O. Box Humber to the state place of | | | | |
| KISS | IMEE FL 32747 | | | 83 | | | | | | |
| | | | | 84 | 0.1 | _ | | 85 | Zip (| |
| | | | | 04 | City | | FL | . 65 | Zip (| ,000 |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE | | | | | | | | | | |
| | Signature, typed or printed name of registered agent | | | | t signature requ | | | ID DIE | FOTO | DC IN 12 |
| 12. | OFFICERS AND DIRECTORS | | | 13. | | | ADDITIONS/CHANGES TO OFFICERS A | | hange | Addition |
| TITLE | DC | ☐ DELETE | 1.1 T | | | | | П | nange | Addition |
| NAME | ZHU, YUE-NING | | 1.2 NAME | | | | | | | |
| STREET ADDRESS | 78-83 CONNAUGHT RD C | | 1.3 STREET ADDRESS | | ADDRESS | | | | | |
| CITY-\$T-ZIP | HONG KONG | | 1.4 CITY | | r-ZIP | | | | | T A datas |
| TITLE | VP | ☐ DELETE 2: | | 2.1 TITLE | | | | ∟∪ | hange | ☐ Addition |
| NAME | CAO, XIAONING 22 | | 2.2 N | 2.2 NAME | | | | | | |
| STREET ADDRESS | 3000 SPLENDID CHINA BLVD. | | 2.3 STRE | | REET ADDRESS | | | | | |
| CITY-ST-ZIP | KISSIMMEE FL 34747 | | | 2. 4 CiTY-ST-ZiP | | | | | h | - Addition |
| TITLE | SDP | DELETE | 3.1 T | | [| | | | hange | ☐ Addition |
| NAME | IANG, GOANG | | 3.2 NAME | | | | | | | |
| STREET ADDRESS | 3000 SPENDID CHINA BLVD. | | 3.3 STREET ADDRESS | | | | | | | |
| CITY-ST-ZIP | KISSIMMEE FL 34747 | | | 3.4. CITY-ST-ZIP | | | | | | |
| TITLE | | ☐ DELETÉ | 4 1 TITLE | | | | | Пс | hange | ☐ Addition |
| NAME | | | 4. 2 NAME | | | | | | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | | | | | } | |
| CITY-ST-ZIP | | | . 4.4 CITY-ST-ZIP | | | | | | FTI A Jaro | |
| TITLE | , | ☐ DELETE | 5.1 T | | | | | ПС | hange | Addition |
| NAME | | | 5.2 N | IAME | | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | | |
| CITY-ST-ZIP | | | 5.4 C | 5.4 CITY-ST-ZIP | | | | | | |

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 or trustee 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 an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

MATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

Daytime P

Daytime Phone #

☐ Addition

R2E034 (11/98)