

**2006 FOR PROFIT CORPORATION
AMENDED ANNUAL REPORT**

L28378

DOCUMENT # L28378
1. Entity Name
SAIPLAS CORPORATON



**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**



Principal Place of Business
~~32760 MONO LAKE LN
FREMONT, CA 94555 US~~
**35495 Dumbarton Ct. Suite A
Newark, CA 94560**

Mailing Address
**PO BOX 7598
FREMONT, CA 94537 US**

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

02262006 Chg-P CR2E034 (11/05)

City & State
Zip Country

4. FEI Number
94-2928688

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**TSAI, JAMES T
402 13TH AVE N
#A
JACKSONVILLE BEACH, FL 32250**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE **DC 06/21/06**

Amended AR is \$61.25

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TSAI, JAMES T. 8544 HUNTERS CREEK N. 32760 Mono Lake Ln. JACKSONVILLE, FL Fremont, CA 94555	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TSAI, NANCY LIN 8644 HUNTERS CREEK N. 32760 Mono Lake Ln. JACKSONVILLE, FL Fremont, CA 94555	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 400076431624 06/21/06--01005--011 **25.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JIANG, STEVE 311 PEACHTREE HILL AVE, APT 16C ATLANTA, GA	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LOH, YIN C. 730 SUMMIT CIRCLE S.E. N. CANTON, OH	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 400076431624 05/26/06--01005--014 **35.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition CFO Bianco, Michael F 1420 Oak Rim Dr. Hillsborough, CA 94010
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition D Chung, Ray T. 34500 Milburn Ter. Fremont, CA 94555

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.

SIGNATURE: Nancy L. Tsai, V.P. Date: 5/22/2006 Daytime Phone #: 510-475-8221