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Secretary of State Statement of Information 133			SI-550					
(California Stock, Agricultural Cooperative and Foreign Corporations)					FIL	ED		
IMPORTANT — Read instructions before completing this form.				Secretary of State State of California				
Fees (Filing plus Disclosure) ~ \$25.00;				JAN 2 2 2019				
Copy Fees – First page \$1.00; each attachment page \$0.50; Certification Fee - \$5.00 plus copy fees								
Corporation Name (Enter the exact name of the corporation as it is recorded with the California Secretary of State. Note: If you registered in California using an assumed name, see instructions.)				│ │				
U.S China Motion Picture Association				2. 7-Digit Secretary of State File Number				
·				C4070158				
3. Business Addresses								
a. Street Address of Principal Executive Office - Do not list a P.O. Box				City (no abbrevi	ations)	State	Zip Code	
120 S. Victory Blvd Suite #204				Burbank	Burbank CA 91502			
b. Mailing Address of Corporation, if different than item 3a				City (no abbrevi	City (no abbreviations) State Zip Code			
c. Street Address of Principal California Office, if any and if different than Item 3a - Do not list a P.O. Box				City (no abbrevi	ations)	State Zip Code		
4. Officers The Corporation is required to list all three of the officers set forth below. An additional title for the Chief Executive Officer and Financial Officer may be added; however, the preprinted titles on this form must not be aftered.								t Chief
a, Chief Executive Officer/ First Name Middle Name			Last Name TO				Suffix	
Address 120 S. Victory Blvd Suite #204				1 - 1 - 1 - 1 - 1 - 1 - 1		Zip Code 91502	I.	
b. Secretary First Name Middle Name Dennis				Last Name Warner				Suffix
Address 120 S. Victory Blvd Suite #204							Zip Code 91502	I. <u></u>
c. Chief Financial Officer/ Manjia	First Name	Middle Name		Last Name Zhao			1	Suffix
Address 120 S. Victory Blvd Suite #204				·		State	Zip Code 91502	
5. Director(s) California Stock and Agricultural Cooperative Corporations ONLY Corporation has additional directors, enter the name(s) and address				: Item 5a: At le	east one name and a	address mu		
a. First Name Middle Name			Last Name		<i>y.</i>		Suffix	
John Address				To City (no abbreviations)		State	Zip Code	}
120 S. Victory Blvd Suite #204				Burbank CA			91502	
b. Number of Vacancies on the Board	of Directors, if any							
6. Service of Process (Must p	•	•						
	is 6a and 6b only. Must include a	gent's fuil name an	d California street Middle Name	address.	Last Name			Suffix
a, California Agent's First Name (if agent is not a corporation) Mi John			Wildele (Valite	To				Sum
b. Street Address (if agent is not a corporation) - Do not enter a P.O. Box 120 S. Victory Blvd Suite #204			City (no abbrev Burbank	(no abbreviations) State Zip C Lirbank CA 915				
CORPORATION – Complete Item 6c only. Only include the name of the registered agent Corporation.								
c. California Registered Corporate Ag	ent's Name (if agent is a corporation	n) – Do not complete	Item 6a or 6b					
7. Type of Business								

8. The Information contained herein, including in any attachments, is true and correct.

1-4-19

Describe the type of business or services of the Corporation Association of Entertainment PROF

John lo

CEO

Signature

SI-550 (REV 01/2017)

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