

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731115

FILED
Feb 06, 2009
Secretary of State

Entity Name: ON LEONG MERCHANT ASSOCIATION, INC.

Current Principal Place of Business:

1750 W. FLAGLER ST
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

1750 W. FLAGLER ST
MIAMI, FL 33135

New Mailing Address:

FEI Number: 59-1705188 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WAI CHIU, MUI
1750 W FLAGLER STREET
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WING FAT, KWAN
Address: 1750 W FLAGLER
City-St-Zip: MIAMI, FL 33135

Title: P () Delete
Name: ESTELLA, TAM
Address: 1750 W FLAGLER STREET
City-St-Zip: MIAMI, FL 33135

Title: D () Delete
Name: WAI CHIU, MUI
Address: 780 E 39 STREET
City-St-Zip: HIALEAH, FL 33013

Title: D () Delete
Name: PAK CHOI, NG
Address: 1480 NW 96 AVENUE
City-St-Zip: MIAMI, FL 33172

Title: S () Delete
Name: JOHNSON, NG
Address: 1750 W FLAGLER STREET
City-St-Zip: MIAMI, FL 33135

Title: T () Delete
Name: WILLIAM, LEUNG
Address: 1859 NE 181 STREET
City-St-Zip: MIAMI, FL 33162

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MUI, BO MAN
Address: 1750 W FLAGLER
City-St-Zip: MIAMI, FL 33135

Title: P (X) Change () Addition
Name: LOUK, WAYNE M
Address: 1750 W FLAGLER STREET
City-St-Zip: MIAMI, FL 33135

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: LOK, TAK LEUNG
Address: 1859 NE 181 STREET
City-St-Zip: MIAMI, FL 33162

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BO MAN MUI

Electronic Signature of Signing Officer or Director

P

02/06/2009

Date