

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 06, 2000 8:00 am**  
**Secretary of State**  
 03-06-2000 90089 030 \*\*\*150.00

**DOCUMENT # 834521**

1. Entity Name  
**T.Y. LIN INTERNATIONAL**

Principal Place of Business      Mailing Address  
**825 BATTERY ST**      **825 BATTERY ST**  
**SAN FRANCISCO CA 94111**      **SAN FRANCISCO CA 94111-1528**

2. Principal Place of Business      3. Mailing Address  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
 City & State      City & State  
 Zip      Country      Zip      Country

4. FEI Number      **94-1598707**      Applied For  
 Not Applicable  
 5. Certificate of Status Desired      ☐      **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**PURPLE, GEORGE**  
**7835 SUNNYMEADE DR N**  
**JACKSONVILLE FL 32211**

7. Name and Address of New Registered Agent  
 Name      **NELSON E. CANJURA**  
 Street Address (P.O. Box Number's Not Acceptable)  
**27803 SUMMER PLACE DRIVE**  
 City      **WESLEY CHAPEL**      **FL**      Zip Code      **33543**

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  
 SIGNATURE      *Nelson E. Canjura*      DATE      **2-23-00**  
 Signature, typed or printed name of registered agent and date if applicable.      (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.      ☒      **FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**  
 10. Election Campaign Financing      ☐      **\$5.00** May Be Added to Fees  
 Trust Fund Contribution.

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KALLAS, WILLIAM E		NAME		
STREET ADDRESS	825 BATTERY ST		STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA 94111		CITY-ST-ZIP		
TITLE	SVP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMES, TAI		NAME		
STREET ADDRESS	825 BATTERY ST		STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA		CITY-ST-ZIP		
TITLE	EVST	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSON, ROBERT A		NAME		
STREET ADDRESS	825 BATTERY ST.		STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA		CITY-ST-ZIP		
TITLE	SVP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERMAN, JOBY		NAME		
STREET ADDRESS	5960 N MILWAUKEE AVE		STREET ADDRESS		
CITY-ST-ZIP	CHICAGO IL		CITY-ST-ZIP		
TITLE	SVP	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ASHLEY, MARK		NAME		
STREET ADDRESS	5030 CCAMINO DE LA SIESTA # 204		STREET ADDRESS		
CITY-ST-ZIP	SAN DIEGO CA		CITY-ST-ZIP		
TITLE	C	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TANG, MAN-CHUNG		NAME		
STREET ADDRESS	825 BATTERY ST.		STREET ADDRESS		
CITY-ST-ZIP	SAN FRANCISCO CA		CITY-ST-ZIP		

13. 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:      *William E. Kallas*      Date      **(415) 291-3700**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Daytime Phone #

CR2E034 (9/99)