2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered.

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jan 14, 2000 8:00 am DOCUMENT # F95000005320 **Secretary of State** SUNOL MOLECULAR CORPORATION 01-14-2000 90055 014 ***150.00 Mailing Address Principal Place of Business 2810 NORTH COMMERCE PARKWAY 2810 NORTH COMMERCE PARKWAY MIRAMAR FL 33025 MIRAMAR FL 33025-3958 £0001937 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0613751 Not Applicable Żip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HUANG, BEE-YAU Street Address (P.O. Box Number is Not Acceptable) 2966 WENTWORTH WESTON FL 33332 Zip Code City 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS Change ☐ Addition ☐ Delete TITI F TITLE WONG, HING CHEUNG NAME NAME STREET ADDRESS STREET ADDRESS 2966 WENTWORTH CITY-ST-ZIP CITY-ST-7IP WESTON FL 33332 ☐ Change ☐ Addition TITLE TITLE ☐ Delete HUANG, BEE-YAU NAME NAME STREET ADDRESS STREET ADDRESS 2966 WENTWORTH CITY-ST-ZIP CITY-ST-ZIP WESTON FL 33332 ☐ Addition Change ۷P ☐ Delete TITLE TAYLOR, DEAN NAME NAME STREET ADDRESS STREET ADDRESS 2563 BAY POINTE DRIVE CITY-ST-ZIP CITY-ST-ZIP WESTON FL 33327 ☐ Addition Change TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 chapter 100 or no an attachment with on address with all laborations.