

**NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90065 030 ****61.25

DOCUMENT # **NO1000003505** ✓

1. Entity Name
FLORIDA-CHINA CHAMBER OF COMMERCE, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3111 Stirling Road
Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 266631
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Fort Lauderdale FL
Zip **33312** Country

City & State
Weston FL
Zip **33326** Country

4. FEI Number
65-1120645
Applied For
Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **David da Silva Cornell**

Street Address (P.O. Box Number is Not Acceptable)
1500 Bay Road #1140

City **Miami Beach** FL Zip Code **33139**

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 **David da Silva Cornell** **David da Silva Cornell, Assistant Secretary and General Counsel** **4/30/2002**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when reinstating) DATE

FEE IS \$61.25
Initial or Amended UBR

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

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

TITLE **P/D**
NAME **Harold Gubnitsky**
STREET ADDRESS **3050 Universal Boulevard, Suite 190**
CITY-ST-ZIP **Weston FL 33331**

TITLE **D**
NAME **Winchell Cheung**
STREET ADDRESS **601 Brickell Key Drive, Suite 509**
CITY-ST-ZIP **Miami FL 33131**

TITLE **V/D**
NAME **Mark Ma**
STREET ADDRESS **5255 NW 165 Street**
CITY-ST-ZIP **Miami FL 33014**

TITLE **D**
NAME **Philip Guo**
STREET ADDRESS **3111 Stirling Road**
CITY-ST-ZIP **Fort Lauderdale FL 33312**

TITLE **V/D**
NAME **Robert Q. Lee**
STREET ADDRESS **2300 SunTrust Center, 200 South Orange Ave.**
CITY-ST-ZIP **Orlando FL 32801**

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IN THIS SPACE**

TITLE **T/D**
NAME **Ty Javellana**
STREET ADDRESS **1250 E. Hallandale Beach Boulevard,**
CITY-ST-ZIP **Hallandale FL 33009 Suite 405**

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IN THIS SPACE**

TITLE **S/D**
NAME **Laura de Swart**
STREET ADDRESS **17 South Fort Lauderdale Beach Boulevard**
CITY-ST-ZIP **Fort Lauderdale FL 33316**

TITLE **D**
NAME **Mee Wong**
STREET ADDRESS **501 NE 187 Street**
CITY-ST-ZIP **North Miami Beach FL 33162**

TITLE **Assistant S/General Counsel /D**
NAME **David da Silva Cornell**
STREET ADDRESS **1500 Bay Road #1140**
CITY-ST-ZIP **Miami Beach FL 33139**

TITLE **D**
NAME **Kerry Brewer**
STREET ADDRESS **2200 W. Commercial Boulevard, Suite 204**
CITY-ST-ZIP **Fort Lauderdale FL 33309**

12. 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 617, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: **David da Silva Cornell** **David da Silva Cornell** **April 30, 2002** **305.579.0733**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037B (12/01)