## 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# N07000002843

FILED Jan 10, 2009 Secretary of State

Entity Name: FLORIDA GENERAL ALLIANCE OF FUJIAN FRATERNITY INCORPORATED

**Current Principal Place of Business: New Principal Place of Business:** 

5060 WEST COLONIAL DRIVE 5052 W COLONIAL DR. SUITE 117 ORLANDO, FL 32808

ORLANDO, FL 32808

**New Mailing Address: Current Mailing Address:** 

5060 WEST COLONIAL DRIVE 5052 W COLONIAL DR. SUITE 117 ORLANDO, FL 32808 ORLANDO, FL 32808

FEI Number: 20-8665814 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

LIU, GUI LIN LIU, GUI LIN 5060 WEST COLONIAL DRIVE 5052 WEST COLONIAL DRIVE

SUITE 117 ORLANDO, FL 32808 ORLANDO, FL 32808 US

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: LIU GUI LIN 01/10/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

LIU. GUI LIN LIU. GUI LIN Name: Name: 5060 WEST COLONIAL DRIVE, #117 Address: 5052 WEST COLONIAL DRIVE Address:

City-St-Zip: ORLANDO, FL 32808 City-St-Zip: ORLANDO, FL 32808

Title: Title: (X) Change ( ) Addition () Delete

Name: LU, LONG QIN Name: LU, LONG QIN

Address: 5060 WEST COLONIAL DRIVE, #117 Address: 5052 WEST COLONIAL DRIVE City-St-Zip: ORLANDO, FL 32808 City-St-Zip: ORLANDO, FL 32808

Title: () Delete Title: SD (X) Change ( ) Addition

LU, TIAN YUE Name: LU, TIAN YUE Name:

5060 WEST COLONIAL DRIVE, #117 5052 WEST COLONIAL DRIVE Address: Address:

City-St-Zip: ORLANDO, FL 32808 City-St-Zip: ORLANDO, FL 32808

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: LIU GUI LIN PD 01/10/2009