2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # N98000007123 Apr 11, 2000 8:00 am Secretary of State SOUTH FLORIDA TAIWANESE ASSOCIATION, INC. 04-11-2000 90055 040 ****61.25 Principal Place of Business Mailing Address 2592 CATIN LEAF COURT 3502-SATIN-LEAP COURT CORAL SPRINCS FL 99965 600 CORAL SPRINGS FL 33065 3. Mailing Address 2. Principal Place of Business NW 2nd St 22nd 951 Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State Lauderdale. Lauderdale 65-0895543 Not Applicable Country \$8.75 Additional 33311 5. Certificate of Status Desired 33311 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **TSAI** HUI Street Address (P.O. Box Number is Not Acceptable CHANG, HUNGCHUN J NW 3592 SATIN LEAF COURT CORAL SPRINGS FL 33065 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) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE 1S \$61.25 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. Change ☐ Addition D X Delete TITLE TITLE NAME NAME CHANG. HUNGCHUN STREET ADDRESS 3592 SATIN LEAF COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33065 ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME HUI WU, TSAI STREET ADDRESS STREET ADDRESS 4001 NE 24TH AVE. CITY-ST-ZIE CITY-ST-ZIP LIGHTHOUSE POINT FL 33064 ☐ Change Addition TITLE D Delete TITLE CHIANG, HUILING NAME NAME STREET ADDRESS STREET ADDRESS 10865 SW 38TH DR. CITY-ST-ZIP CITY-ST-ZIP DAVIE FL 33328 Change ☐ Addition ☐ Delete TITLE TITLE n NAME CHANG, NELSON NAME STREET ADDRESS STREET ADDRESS 6759 SW 88TH STREET, #C314 CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33156** ☐ Change ☐ Addition TITLE Delete TITLE NAME NAME HSIANG, KUEI-TANG STREET ADDRESS STREET ADDRESS 8504 SW 18ST, TERR. CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33157** ☐ Change ☐ Addition Delete TITLE TITLE NAME HUANG, PAUL NAME STREET ADDRESS STREET ADDRESS 7705 CAMINO REAL, #B401 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33143 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 Block 11 if

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Date

Description Phone #

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