

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 18, 2000 8:00 am**  
**Secretary of State**

04-18-2000 90192 046 \*\*\*150.00

**DOCUMENT # P92000006326**

1. Entity Name  
**AMERICA INTERNATIONAL, INC.**

Principal Place of Business  
**14515 S.W. 152ND TERRACE  
 MIAMI FL 33177**

Mailing Address  
**14515 S.W. 152ND TERRACE  
 MIAMI FL 33177-6840**

**638655**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

**4601 Le Jeune Road**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State  
**Coral Gables, FL**

4. FEI Number **65-0373337**

Applied For  
 Not Applicable

Zip Country

Zip Country  
**33146 Dade**

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LU, JIEMIN  
 14515 S.W. 152ND TERRACE  
 MIAMI FL 33177**

Name **Lu Jiemin**  
 Street Address (P.O. Box Number is Not Acceptable)  
**4601 Le Jeune Road**  
 City **Coral Gables FL** Zip Code **33146**

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title 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.   
 (See criteria on back)

**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 Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	<b>D</b>			
	<b>LU, JIEMIN</b>	<b>14515 S.W. 152ND TERRACE</b>	<b>MIAMI FL 33177</b>	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
		<b>4601 Le Jeune Road</b>	<b>Coral Gables, FL 33146</b>		

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: *Jiemin Lu (Lu Jiemin)*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4/11/00 Daytime Phone # (305) 461-2151