

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90089 030 ***150.00

DOCUMENT # 834521

1. Entity Name

T.Y. LIN INTERNATIONAL

Principal Place of Business

Mailing Address

825 BATTERY ST
SAN FRANCISCO CA 94111

825 BATTERY ST
SAN FRANCISCO CA 94111-1528

NOV 27 2001

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

94-1598707

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

PURPLE, GEORGE
7835 SUNNYMEADE DR N
JACKSONVILLE FL 32211

7. Name and Address of New Registered Agent

Name

NELSON E. CANJURA

Street Address (P.O. Box Number's Not Acceptable)

27803 SUMMER PLACE DRIVE

City

WESLEY CHAPEL

FL

Zip Code

33543

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 not if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2-23-00

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	☐ Delete
PD	KALLAS, WILLIAM E	825 BATTERY ST	SAN FRANCISCO CA 94111	☐
SVP	JAMES, TAI	825 BATTERY ST	SAN FRANCISCO CA	☐
EVST	PETERSON, ROBERT A	825 BATTERY ST.	SAN FRANCISCO CA	☐
SVP	BERMAN, JOBY	5960 N MILWAUKEE AVE	CHICAGO IL	☐
SVP	ASHLEY, MARK	5030 CCAMINO DE LA SIESTA # 204	SAN DIEGO CA	☐
C	TANG, MAN-CHUNG	825 BATTERY ST.	SAN FRANCISCO CA	☐

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change	☐ Addition
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐
				☐	☐

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

(415) 291-3700

CR2E034 (9/99)