FROM : NETSCH, CPA PHONE NO. : 941 466 51

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 31, 2001 8:00 am
Secretary of State
05-31-2001 90001 009 ***150.00

DOCUMENT # S49967

1. Entity Name
TPS WU, INCORPORATED

Principal Place of Business	Mailing Address
% NETSCH & ASSOCIATES CPA, PA 9800 S. HEALTHPARK DR. #410 FT MYERS FL 33908 US	% NETSCH & ASSOCIATES CPA, PA 9800 HEALTHPARK C RCLE SUITE 410 FT MYERS FL 33908

55-33-42

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
13161 McGregor Blvd	13161 McGregor Blvd
Suite, Apt. #, etc. Suite # 3-B	Suite, Apt. #, etc Suite # 3-B
City & State Fort Myers, Fl	City & State Fort Myers, Fl
Zip 33919 Country USA	Zip 33919 Country USA

4. FEI Number 65-0305361 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

WHITNEY, JAMES W
3045 ESTERO BLVD.
SUITE 434
FT. MYERS BCH FL 33931

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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, 2001 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	PD SHUI KWAI LAW, TERESA 2471 AVONGATE DRIVE MISSISSAUGA, ONT CAN	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD NGAN PENG WU, SALLY 2471 AVONGATE DRIVE MISSISSAUGA, ONT CAN	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD LAI TAK WU, PETER 2471 AVONGATE DRIVE MISSISSAUGA, ONT CAN	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ 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] (PETER WU) April 25, 2001 905-275-9799
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #