

# 2002 UNIFORM BUSINESS REPORT (UBR)

1 of 2

**DOCUMENT # P98000017274**

1. Entity Name  
**HARBOUR PLAZA MARKETING INC.**

FILED

02 MAR 21 AM 11:55

Principal Place of Business  
**20801 BISCAYNE BLVD.  
SUITE 401. AVENTURA CORPORATE CENTRE  
AVENTURA FL 33180**

Mailing Address  
**20801 BISCAYNE BLVD.  
SUITE 401. AVENTURA CORPORATE CENTRE  
AVENTURA FL 33180**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number  
**65-0944391**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent  
**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301**

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 N/A  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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, 2002 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

TITLE	<b>D</b>	<input type="checkbox"/> Delete
NAME	<b>CHOW, SUSAN</b>	
STREET ADDRESS	<b>22ND FLOOR HUTCHISON HOUSE</b>	
CITY-ST-ZIP	<b>10 HARCOURT HONG KONG</b>	
TITLE	<b>DP</b>	<input type="checkbox"/> Delete
NAME	<b>LAI, DOMINIC</b>	
STREET ADDRESS	<b>22ND FLOOR HUTCHISON HOUSE</b>	
CITY-ST-ZIP	<b>10 HARCOURT ROAD HONG KONG</b>	
TITLE	<b>DS</b>	<input type="checkbox"/> Delete
NAME	<b>SHIH, EDITH MS</b>	
STREET ADDRESS	<b>22ND FLOOR HUTCHISON HOUSE</b>	
CITY-ST-ZIP	<b>10 HARCOURT ROAD HONG KONG</b>	
TITLE	<b>DT</b>	<input type="checkbox"/> Delete
NAME	<b>KOH, P.C.</b>	
STREET ADDRESS	<b>22ND FLOOR HUTCHISON HOUSE</b>	
CITY-ST-ZIP	<b>10 HARCOURT HONG KONG</b>	
TITLE	<b>DVP</b>	<input type="checkbox"/> Delete
NAME	<b>WALDBURGER, E.A.</b>	
STREET ADDRESS	<b>22ND FLOOR HUTCHISON HOUSE</b>	
CITY-ST-ZIP	<b>10 HARCOURT ROAD HONG KONG</b>	
TITLE	<b>DP</b>	<input type="checkbox"/> Delete
NAME	<b>CHOW, RAYMOND</b>	
STREET ADDRESS	<b>22ND FLOOR HUTCHISON HOUSE</b>	
CITY-ST-ZIP	<b>10 HARCOURT ROAD HONG KONG</b>	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<b>D</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LAI, DOMINIC</b>	
STREET ADDRESS	<b>22ND FLOOR HUTCHISON HOUSE</b>	
CITY-ST-ZIP	<b>10 HARCOURT ROAD HONG KONG</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

600005140289

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: Edith Shih Dir/Co Sec 28th February, 2002 (852) 2128 1188  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

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ACCOUNT NO. : 072100000032  
REFERENCE : 487873 7329894  
AUTHORIZATION : *Patricia Pizjito*  
COST LIMIT : \$ 150.00

-----  
ORDER DATE : March 21, 2002  
ORDER TIME : 3:39 PM  
ORDER NO. : 487873-005  
CUSTOMER NO: 7329894  
CUSTOMER: Mr. James Beard  
Harbour Plaza Marketing Inc.  
20801 Biscayne Blvd  
Suite 401  
Miami, FL 33180  
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ANNUAL REPORT FILING

NAME: HARBOUR PLAZA MARKETING INC.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX        PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds-EXT#1133

EXAMINER'S INITIALS: \_\_\_\_\_

RECEIVED  
02 MAR 21 PM 4: 21  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA