## 2002 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 29, 2002 8:00 am Secretary of State DOCUMENT # P95000071915 1. Entity Name 04-29-2002 90145 003 \*\*\*150 00 LEE MART, INC. Principal Place of Business Mailing Address 18541 E. NOTTINGHAM LANE 18541 E. NOTTINGHAM LANE **ROWLAND HEIGHTS CA 91748** ROWLAND HEIGHTS CA 91748 Uŝ US 2. Principal Place of Business 3. Mailing Addres Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For 4. FEI Number 59-3339458 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name TSAY, YIN HUI Street Address (P.O. Box Number is Not Acceptable) **6828 CIRCLE CREEK DRIVE >** PINELLAS PARK FL 34665 City 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete TITLE Change ☐ Addition TITLE NAME KAN LI, JUNG (STEWART) NAME STREET ADDRESS STREET ADDRESS 18541 E. NOTTINGHAM LANE CITY-ST-7IP CITY-ST-ZIP **ROWLAND HEIGHTS CA 91748** ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME YIN HUI TSAY, (STEPHANY) STREET ADDRESS STREET ADDRESS 18541 E. NOTTINGHAM LANE CITY-ST-7/P CITY-ST-ZIF **ROWLAND HEIGHTS.CA 91748** ∠ □ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 attachmen

STREET ADDRESS

CITY-ST-ZIP

TITLE

SIGNATURE: -

TITLE

NAME STREET ADDRESS

CITY-ST-ZIP

☐ Delete

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