

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000188019

Entity Name: HC 1029 LLC

Current Principal Place of Business:

6F., NO. 10-1, LN. 5, LINSEN N. RD.,
ZHONGZHENG DIST.,
TAIPEI CITY, 10049

Current Mailing Address:

6F., NO. 10-1, LN. 5, LINSEN N. RD.,
ZHONGZHENG DIST.,
TAIPEI CITY, 10049 TW

FEI Number: 30-0914503

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC.
7901 4TH ST N
STE 300
ST. PETERSBURG, FL 33702 US

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: BILL HAVRE

01/27/2021

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name WANG, SU-MING
Address 6F., NO. 10-1, LN. 5, LINSEN N. RD.,
ZHONGZHENG DIST.,
City-State-Zip: TAIPEI CITY TAIWAN 10049

Title AMBR
Name TSAI, YUN-RUNG
Address 6F., NO. 10-1, LN. 5, LINSEN N. RD.,
ZHONGZHENG DIST.,
City-State-Zip: TAIPEI CITY TAIWAN 10049

Title AMBR
Name TSAI, TING-HO
Address 6F., NO. 10-1, LN. 5, LINSEN N. RD.,
ZHONGZHENG DIST.,
City-State-Zip: TAIPEI CITY TAIWAN 10049

Title AMBR
Name TSAI, CHEN-YU
Address 6F., NO. 10-1, LN. 5, LINSEN N. RD.,
ZHONGZHENG DIST.,
City-State-Zip: TAIPEI CITY TAIWAN 10049

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WANG , SU-MING

AMBR

01/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date