

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F18000000757

Entity Name: PANDA CARES FOUNDATION, INC.**Current Principal Place of Business:**1683 WALNUT GROVE AVE
ROSEMEAD, CA 91770**Current Mailing Address:**1683 WALNUT GROVE AVE
ROSEMEAD, CA 91770 US**FEI Number:** 81-2094929**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT/CEO
Name	CHERNG, PEGGY TSIANG
Address	1683 WALNUT GROVE AVE
City-State-Zip:	ROSEMEAD CA 91770

Title	TREASURER/CFO
Name	CHERNG, PEGGY TSIANG
Address	1683 WALNUT GROVE AVE
City-State-Zip:	ROSEMEAD CA 91770

Title	DIRECTOR
Name	BURKE, DENNIS
Address	1683 WALNUT GROVE AVE
City-State-Zip:	ROSEMEAD CA 91770

Title	SECRETARY
Name	CHAN, WINNIE
Address	1683 WALNUT GROVE AVE
City-State-Zip:	ROSEMEAD CA 91770

Title	DIRECTOR
Name	CHERNG, ANDREW JIN-CHAN
Address	1683 WALNUT GROVE AVE
City-State-Zip:	ROSEMEAD CA 91770

Title	CHAIRMAN OF THE BOARD
Name	CHERNG, PEGGY TSIANG
Address	1683 WALNUT GROVE AVE
City-State-Zip:	ROSEMEAD CA 91770

Title	DIRECTOR
Name	CHERNG, PEGGY TSIANG
Address	1683 WALNUT GROVE AVE
City-State-Zip:	ROSEMEAD CA 91770

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: WINNIE CHAN**SECRETARY****04/10/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date