2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 18, 2000 8:00 am Secretary of State **DOCUMENT # 550245** 1. Entity Name RISING SUN FOREIGN CARS, INC. 04-18-2000 90174 002 ***150.00 Principal Place of Business Mailing Address 4917 NORTH UNIVERSITY DRIVE 4917 NORTH UNIVERSITY DRIVE LAUDERHILL FL 33351 LAUDERHILL FL 33351-5786 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-1814723 Not Applicable Zip Country **\$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 BRADY, KENNETH F. Street Address (P.O. Box Number is Not Acceptable) 11400 NW 21ST COURT PLANTATION FL 33323 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) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) П Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITE Addition TITLE Change ☐ Delete BRADY, KENNETH F NAME NAME STREET ADDRESS 11400 N.W. 21ST COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PLANTATION FL Addition TITLE ☐ Delete TITLE Change WONG, LEO NAME NAME STREET ADDRESS 2411 WINDING RIDGE S. STREET ADDRESS CITY-ST-ZIP KISSIMMEE FL 34741 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Addition ☐ Delete TITLE Change NAME STREET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Chande ☐ Addition HILE NAME Singer ADDRESS STREET ADDRESS . ST ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME CHARLE ANDRESS STREET ADDRESS ST-7IP CITY-ST-7IP

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 the empowered.

IN DED NAME OF SIGNING OFFICER OR DIRECTOR

BRADY

9-11-2000

Date Davime Phone #