FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Apr 29, 2002 8:00 am Secretary of State DOCUMENT # 674968 1. Entity Name 04-29-2002 90024 041 \*\*\*150.00 SUNNY SUN GLASSES OF MIAMI, INC. Principal Place of Business Mailing Address 8900 NW 33RD ST 8900 NW 33RD ST MIAMI FL 33172 MIAMI FL 33172 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 59-2009 195 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JA-HSIUNG HUANG Street Address (P.O. Box Number is Not Acceptable) 11326 SW 153 CT. **MIAMI FL 33196** 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 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. (See criteria on back) Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete TITLE ☐ Change Addition NAME ] HUANG, JASON NAME STREE ADDRESS 11326 SW 153 CT. STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33196** CITY-ST-ZIP TITLE STD ☐ Delete TITLE ☐ Change ■ Addition NAME HUANG, L.Y. TSENG NAME STREET ADDRESS 11326 SW 153\_CT. STREET ADDRESS CITY-ST-ZIP MIAMI, FL/33195. CITY-ST-ZIP TITLE ☐ Delete TITLE `□ Change ☐ Addition NAME LEE, CHWAN-RUEY STREET ADDRESS 6830 VERONEST\_ST STREET ADDRESS CITY-ST-ZIP MIAMI FL ( CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition TSENG, YUNG-LUNG NAME NAME STREET ADDRESS 15358 S.W. 113TH TERRACE STREET ADDRESS CITY-ST-ZIP MIAMI FL CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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

SIGNATURE:

changed, or on an attachment with an address, with all other like empowered.