Daytime Phone #

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Feb 17, 2002 8:00 am DOCUMENT # 853370 Secretary of State 1. Entity Name 02-17-2002 90020 020 ***150.00 C & O REALTY CORP. Principal Place of Business Mailing Address 36 EAST 74TH ST. 36 EAST 74TH ST. **NEW YORK NY 10021** NEW YORK NY 10021 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 13-3119322 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent LINDSEY, DONNA HUANG Street Address (P.O. Box Number is Not Acceptable) 15924 ELLSWORTH DR. TAMPA FL 33647 Zip Code City 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 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. TITLE ☐ Delete TITLE HUANG, PAUL NAME STREET ADDRESS 36 E. 74TH ST. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NY NY TITLE ☐ Delete TITLE Change ☐ Addition NAME HUANG, CHARLES NAME STREET ADDRESS STREET ADDRESS 36 E. 74TH ST. CITY-ST-ZIP CITY-ST-ZIP **NEW YORK NY** ☐ Addition TITLE ☐ Delete TITLE Change LINDSEY, DONNA HUANG NAME NAME STREET ADDRESS STREET ADDRESS 15924 ELLSWORTH DR CITY-ST-ZIP CITY-ST-ZIP <u>tampa fl</u> TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME CHA, ASSUNTA STREET ADDRESS STREET ADDRESS **5 WILLOW CRESENT** CITY-ST-7IP CITY-ST-ZIP **BROOKLINE MA** ☐ Delete TIT! F TITLE Change Addition NAME NAME IP, CECILIA STREET ADDRESS STREET ADDRESS 427 PAZZI RD. CITY-ST-ZIP CITY-ST-ZIP WALNUT CREEK CA TITLE ☐ Change ☐ Addition Delete TITLE NAME NAME MARTI. DUEN STREET ADDRESS STREET ADDRESS **UNTERE HARDEGG 32** CITY-ST-ZIP CITY-ST-ZIP 4600 OLTEN, SWITZ 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 like empowered. PAUL D.C. HUNG 1/30/02