2000 UNIFORM BUSINESS REPORT (UBR) FILED May 04, 2000 8:00 am Secretary of State **DOCUMENT # F69734** 1. Entity Name wrong zip code SUNNY TRADING, INC. 05-04-2000 90176 027 ***150.00 Principal Place of Business 8900 NW 33RD ST 8900 NW 33RD ST. บยผถ48 MIAMI FL 33172-1223 MIAMICFL 33126-1019 FL33/192-1223 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2194651 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 Name HUANG, JASON H. Street Address (P.O. Box Number is Not Acceptable) 11326 SW 153 CT. MIAMI FL 33196 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 Мау Вө After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. STO PD ☐ Change ☐ Addition TITLE ☐ Delete TITLE HUANG, JASON H. NAME NAME STREET ADDRESS 11326 SW 153 CT. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Change ☐ Addition ☐ Defete TITLE TITLE NAME HUANG, TSENG L. Y. NAME STREET ADDRESS STREET ADDRESS 11326 SW 143 CT. CITY-ST-ZIP CITY-ST-ZIP MIAMI FL Delete **VPD** TITLE NAME LEE, RAY NAME STREET ADDRESS STREET ADDRESS 6830 VERONESE ST. CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL.33146 ☐ Change ☐ Addition □ Delete TITLE TITLE NAME TSENG, YUNG-LUNG NAME STREET ADDRESS 15358 SW 113 TERR STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI FL ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

I hereby certify that the information supplied with this filling 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.

4-24-00