2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 12, 2001 8:00 am Secretary of State **DOCUMENT # H41773** SUN HAI VALLEY ENTERPRISES, INC. 02-12-2001 90245 028 ***150.00 Mailing Address Principal Place of Business 2534 PGA BLVD 2534 PGA BLVD 621375 PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL 33410 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-2527557 Not Applicable \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CHANG, LILY Street Address (P.O. Box Number is Not Acceptable) 2534 PGA BLVD. PALM BEACH GARDENS FL 33410 Zip Code City FL 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change Addition TITLE ☐ Delete PD NAME NAME CHANG, LILY STREET ADDRESS STREET ADDRESS 2534 PGA BLVD CITY-ST-ZIP CITY-ST-ZIP PALM BCH GARDENS FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE TD NAME NAME FENG. MICHAEL STREET ADDRESS STREET ADDRESS 2534 PGA BLVD. CITY-ST-ZIP CITY-ST-ZIP PALM BCH, GARDENS FL Change TITLE Delete TITLE SD NAME NAME YUH-LING CHENG STREET ADDRESS STREET ADDRESS 2534 PGA BLVD CITY-ST-ZIP CITY-ST-ZIP PALM BCH. GARDENS FL ☐ Addition Change Delete TITLE TITLE **VPD** NAME NAME FENG, KATY STREET ADDRESS STREET ADDRESS 2534 PGA BLVD CITY-ST-ZIP CITY-ST-ZIP PALM BEACH GARDENS FL Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS ۲ CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. 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.

SIGNATURE:

OFFICER OR DIRECTOR SIGNATURE AND TYPEO OR PRINTED NAME OF SIGN