

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 05, 2002 8:00 am**  
**Secretary of State**

02-05-2002 90063 016 \*\*\*150.00

**DOCUMENT # H55863**

1. Entity Name  
**GOLDEN HOUSE OF CHIEFLAND, INC.**

Principal Place of Business  
**3906 SUNCOAST BLVD**  
**P.O. BOX 1900**  
**HOMOSASSA SPRINGS FL 32647**

Mailing Address  
**3906 SUNCOAST BLVD**  
**P.O. BOX 1900**  
**HOMOSASSA SPRINGS FL 32647**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**3906 S SUNCOAST BLVD**  
 Suite, Apt. #, etc.

3. Mailing Address  
**3906 S SUNCOAST BLVD**  
 Suite, Apt. #, etc.

City & State  
**HOMOSASSA SPRINGS**  
 Zip **FL 34448** Country

City & State  
**HOMOSASSA SPRINGS**  
 Zip **34448** Country

4. FEI Number **59-2535582**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

**6. Name and Address of Current Registered Agent**

**WANG, YUH-CHUNG**  
**10139 W. HALLS RIVER RD**  
**HOMOSASSA SPRINGS FL 32647**

**7. Name and Address of New Registered Agent**

Name **KATHERINE CHEN**  
 Street Address (P.O. Box Number is Not Acceptable)  
**16 GULF VIEW CT**  
 City **HOMOSASSA** State **FL** Zip Code **34448**

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 **1/15/02**  
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 Tax filing requirement and elects to do so. (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**11. OFFICERS AND DIRECTORS**

TITLE	<b>P</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>WANG, YUH-CHUNG</b>	
STREET ADDRESS	<b>10139 W. HALLS RIVER RD</b>	
CITY-ST-ZIP	<b>HOMOSASSA SPRINGS FL</b>	
TITLE	<b>ST</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>WANG, CHIUNG-JUNG</b>	
STREET ADDRESS	<b>10139 W. HALLS RIVER RD</b>	
CITY-ST-ZIP	<b>HOMOSASS SPRINGS FL</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	<b>P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>PAN WEN</b>	
STREET ADDRESS	<b>9405 CRAB TREE LANE</b>	
CITY-ST-ZIP	<b>PORT RICHEY, FL 34668</b>	
TITLE	<b>ST</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KATHERINE CHEN</b>	
STREET ADDRESS	<b>16 GULF VIEW CT</b>	
CITY-ST-ZIP	<b>HOMOSASSA SPRINGS, FL 34448</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  DATE **1/15/02**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/01)