FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

J39614

FILED Jun 25, 2002 8:00 am Secretary of State

1. Entity Name	101011
UNCLE	TAI'S, INC.

DOCUMENT #

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DO NOT WRITE IN THIS SPACE				80125744		
2. Principal P	lace of Business	3. Mailing Address				
Suite, Apt.	#, etc. 50 Town Center Circle		enter Circle	DO NOT WRITE IN THIS SPACE		
City & Stat	BOCA RATON	City & State	Raton	4. FEI Number Applied For Not Applied be		
^{Zip} 334	Country Country	zip 334 8 6	Country	5. Certificate of Status Desired S8.75 Additional Fee Required		
	· · · · · · · · · · · · · · · · · · ·			7. Name and Address of Current Registered Agent		
ى رى <u>سىنى يەسىمى</u> ،			Name C	OHEN, FREDC.		
	DO NOT WI	RHE		Street Address (P.O. Box Number is Not Acceptable)		
IN THIS SPACE		7/2	712 U.S. HWY ONE, 4TH FLOOR			
				RTH PALM BEACH FL Zip Code 33408		
8. The above	named entity submits this statement for	the purpose of changing its re	egistered office or reg	gistered agent, or both, in the State of Florida.		
SIGNATURE .	Signature, 1, and or printed name of registered agent an	nd title if applicable. (NOTE:	Registered Agent signature re	equired when reinstating) DATE		
	oration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	After May 1	y 1 Fee is \$150.00 , Fee is \$550.00 UBR is \$61.25 e to Department of	10. Election Campaign Financing — \$5.00 May Be Trust Fund Contribution. — Added to Fees		
11.	OFFICERS AND D	DIRECTORS				
TITLE NAME	PO		TITLE NAME			
STREET ADDRESS	TAI, CHI-HWA	1D #143	STREET ADDRESS	•		
CITY-ST-ZIP	TAI, CHI-HWA 5250 TOWN CTR, C BOCA RATO	N F/ 33486	CITY-ST-ZIP			
TITLE	_ ,	· -	TITLE			
NAME STREET ADDRESS			NAME STREET ADDRESS	•		
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

06/18/02

Daytime P

Daytime Phone #

R2E034B (12/0

Attachment Document # 539614 BD125744

Uncle Pai Inc 5250 Town Center Cir Boca Raton Fl 33486

Request taken by: mbarrett 06-03-2002

The forms you recently requested from this office are:

(1) 201. COR Profit A/R

Should you have any questions or need any further information, please contact us at the address below:

Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314

Uncle Tai's Inc. 5250 Town Center Circle Suite 143 Boca Raton, FL 33486-1067507 Telephone: (561) 368-8806 AHachment Document # 539614 10125744

JUN 18, 2002

Florida Department Of State Uniform Business Report Division of Corporations Tallahassee, FL 32302-1500

Re: Uncle Tai's Inc.

Document Number: J39614

Dear Department of State, ---

We just received Uniform Business Report Form on Jun 10, 2002. This letter includes the check \$150.00 for the fee and the cover sheet which your officer sent with the UBR to our company. Since we didn't receive the UBR form on time, we respectfully request abatement of any penalty.

If you have any questions or need any additional information, Please contact me at (561) 241-5524.

Sincerely,

Chi Hwa Tai President