

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 25, 2001 8:00 am
Secretary of State

07-25-2001 90014 001 ***150.00

DOCUMENT # K03844

1. Entity Name

RIDDON (FLORIDA), INC.

(LA)

Principal Place of Business

**800 E HALLANDALE BEACH BLVD
HALLANDALE FL 33009
US**

Mailing Address

**800 E HALLANDALE BEACH BLVD
HALLANDALE FL 33009
US**

00059500



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0019208**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

**DALE, CHARLES S., JR.
2765 W. CYPRESS CREEK ROAD
SUITE B
FT. LAUDERDALE FL 33309**

ADDRESS
CHANGED
ONLY

7. Name and Address of New Registered Agent

Name **DALE, CHARLES S., JR.**

Street Address (P.O. Box Number is Not Acceptable)

414 NE 4 ST.

City **FT. LAUDERDALE**

FL

Zip Code **33301**

954-462-7472

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)

DATE

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 **P** ☐ Delete
NAME **TSE, SUK FUN**
STREET ADDRESS **1435 N.E. 181ST STREET**
CITY-ST-ZIP **NORTH MIAMI BEACH FL 33162**

TITLE **S** ☐ Delete
NAME **TSE, CHOK YIN**
STREET ADDRESS **1435 N.E. 181ST STREET**
CITY-ST-ZIP **NORTH MIAMI BEACH FL 33162**

TITLE **V** ☐ Delete
NAME **TONG, CHEUK SUN**
STREET ADDRESS **1435 N.E. 181ST STREET**
CITY-ST-ZIP **NORTH MIAMI BEACH FL 33162**

TITLE **T** ☐ Delete
NAME **TONG, CHEUK MAN**
STREET ADDRESS **1435 N.E. 181ST STREET**
CITY-ST-ZIP **NORTH MIAMI BEACH FL 33162**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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:

SIGNATURE REQUIRED
[Signature] President

Date

Daytime Phone #

7/17/01

CR2E034 (5/01)