2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

4/23/

FILED
Jun 11, 2003 8:00 am
Secretary of State

04-23-2003 90234 008 ****50.00

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[redacted]

DOCUMENT # L99000003791

1. Entity Name
ASIAN PARTNERS INVESTMENTS, L.L.C.

Principal Place of Business	Mailing Address
152 N.E. 167TH STREET, SUITE 211 N. MIAMI BEACH FL 33162	152 N.E. 167TH STREET, SUITE 211 N. MIAMI BEACH FL 33162

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
152 N.E. 167th Street	same
Suite, Apt. #, etc. #401	Suite, Apt. #, etc.
City & State N. Miami Beach, Fl	City & State
Zip 33162 / Country Dade	Zip / Country

4. FEI Number 65-0832949 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CHANG, ANTHONY
152 N.E. 167TH STREET, SUITE 211
N. MIAMI BEACH FL 33162

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL 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. I am familiar with, and accept the obligations of registered agent.

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 $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS / MANAGERS		10. ADDITIONS / CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM CHANG, ANTHONY M.C. 11133 NW 2ND COURT CORAL SPRINGS FL 33071 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGR Liu, Song Wen c/o Chang, 11133 N.W. 2nd Ct Coral Spring,s Fl. 33071 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E083 (10/02)

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE REQUIRED 4/14/03 305-945-8886
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #