

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Feb 01, 2005 08:00 AM  
Secretary of State

DOCUMENT # N01000006524

1. Entity Name

BUDDHA'S LIGHT INTERNATIONAL ASSOCIATION, INC.



Principal Place of Business

2250 PRINCIPAL  
ORLANDO FL 32837

Mailing Address

8217 TIVOLI DR  
ORLANDO FL 32861

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number  
76-0707439

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIU, RACHEL L  
5100 OLD HOWELL BRANCH ROAD  
WINTER PARK FL 32792

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25  
Due By May 1, 2005

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete  
NAME SHEN, SUH-YUEH  
STREET ADDRESS 1401 NE ST.  
CITY- ST- ZIP MIAMI SHORE FL 33138

TITLE ☐ Change ☐ Addition  
NAME UN00000208564  
STREET ADDRESS 02/01/05-80091-016 61.25  
CITY- ST- ZIP

TITLE D ☐ Delete  
NAME CHEN, HSI CHING  
STREET ADDRESS 2537 BAYFRONT PARKWAY  
CITY- ST- ZIP ORLANDO FL 32806

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

TITLE D ☐ Delete  
NAME HENDRIX, YUTZE  
STREET ADDRESS 7413 OAKVISTA CIRCLE  
CITY- ST- ZIP TAMPA FL 33634

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

TITLE D ☐ Delete  
NAME WU, CHENG-CHAI  
STREET ADDRESS 8623 SUMMERVILLE PLACE  
CITY- ST- ZIP ORLANDO FL 33634

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

TITLE D ☐ Delete  
NAME YEH, EDDIE  
STREET ADDRESS 2250 PRINCIPAL  
CITY- ST- ZIP ORLANDO FL 32837

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

TITLE D ☐ Delete  
NAME LEE LIN, SUE  
STREET ADDRESS 3955 ET ARMINIS CR  
CITY- ST- ZIP MELBOURNE FL 32934

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, Florida Statutes, and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #