

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2001 8:00 am
Secretary of State

03-13-2001 90063 005 ****61.25

DOCUMENT # N36237

1. Entity Name

CHUNG WAH CEMETERY ASSOCIATION OF MIAMI, INC.

Principal Place of Business

% FELIPE LI
 13939 LAKE SUCCESS PLACE
 MIAMI LAKES FL 33014

Mailing Address

% FELIPE LI
 13939 LAKE SUCCESS PLACE
 MIAMI LAKES FL 33014

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

65-0328490

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

LI, FELIPE
 13930 LAKE SUCCESS PLACE
 MIAMI LAKES FL 33014

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.

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**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Delete
 NAME ~~TSOI, JHON~~
 STREET ADDRESS ~~1117 NE 163RD ST~~
 CITY-ST-ZIP ~~N MIAMI BEACH FL~~

TITLE ☒ Change ☐ Addition
 NAME **ARON NG S.**
 STREET ADDRESS **7467 N.W. 169 LAN.**
 CITY-ST-ZIP **MIAMI BEACH FL 33016**

TITLE ☒ Delete
 NAME ~~CHU, ANTHONY L.~~
 STREET ADDRESS ~~3740 SW 104TH CT~~
 CITY-ST-ZIP ~~MIAMI FL~~

TITLE ☒ Change ☐ Addition
 NAME **PAK CHOI NG V.**
 STREET ADDRESS **1480 N.W. 96 AVE**
 CITY-ST-ZIP **MIAMI FL 33172**

TITLE ☒ Delete
 NAME ~~WONG, TONY~~
 STREET ADDRESS ~~6604 ARBOR DR~~
 CITY-ST-ZIP ~~HOLLYWOOD FL~~

TITLE ☒ Change ☐ Addition
 NAME **SU TUNG TANG D.**
 STREET ADDRESS **10347 N.W. 56 TERR.**
 CITY-ST-ZIP **MIAMI FL 33178**

TITLE ☒ Delete
 NAME ~~LEE, PATRICK~~
 STREET ADDRESS ~~1750 W FLAGLER ST~~
 CITY-ST-ZIP ~~MIAMI FL~~

TITLE ☐ Change ☐ Addition
 NAME **WING FAT KWAN D.**
 STREET ADDRESS **1750 W. FLAGLER ST.**
 CITY-ST-ZIP **MIAMI FL 33135**

TITLE ☒ Delete
 NAME ~~MUY, FERNANDO CHANG~~
 STREET ADDRESS ~~3251 E 11TH AVE~~
 CITY-ST-ZIP ~~MIAMI BEACH FL~~

TITLE ☒ Change ☐ Addition
 NAME **WAI CHIU MUI P.**
 STREET ADDRESS **780 E. 395K**
 CITY-ST-ZIP **MIAMI BEACH FL 33013**

TITLE ☐ Delete
 NAME **LI, FELIPE**
 STREET ADDRESS **13930 LAKE SUCCESS PLACE**
 CITY-ST-ZIP **MIAMI LAKES FL**

TITLE ☒ Change ☐ Addition
 NAME **CHAN T. LEUNG T.**
 STREET ADDRESS **388 N.E. 177 TERR.**
 CITY-ST-ZIP **N. MIAMI BEACH FL 33162**

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED FELIPE LI

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-7-2001

CR2E037 (10/00)