2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

May 05, 2004 8:00 am Secretary of State DOCUMENT # N95000000071 05-05-2004 90235 042 ****61.25 1. Entity Name TAIWAN BUSINESS ASSOCIATION IN FLORIDA, INC. Principal Place of Business Mailing Address 14021809 1951 N.W. 22ND ST. FORT LAUDERDALE FL 33311 1951 N.W. 22ND ST. FORT LAUDERDALE FL 33311 US 2. Principal Place of Büsiness 3. Mailing Address 8952 N.W. Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State 4. FEI Number Applied For 65-0547474 Meanu Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHUNCHIE Allen TSAI WU, TSAI-HUI Street Address (P.O. Box Number is Not Acceptable) 1951 N.W. 22ND ST. FORT LAUDERDALE FL 33311 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 4-30-2004 SIGNATURE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS <u>,10</u>. 11. Chunchie Allen Tsai Director TITLE TITLE Delete WU, TSAI-HUI NAME NAME 9469 NW 54 Doral Cir. Lame 1951 N.W. 22ND ST. STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33311 Miami FL 33178 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition TITLE . TITLE NG. JOHANY NAME NAME 1480 N.W. 96TH AVE. STREET ADDRESS STREET ADDRESS **MIAMI FL 33172** CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition LIU, PAT VAN NAME NAME 319 CANDIA AVE STREET ADDRESS STREET ADDRESS MIAMI FL 33134 CITY-ST-ZIP CITY-ST-7/P ☐ Addition TITLE Delete TITLE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITI F TITI F NAME NAME STREET ADDRESS 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)(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:

FILED

4-30-2004 3055913388