


**2003 NOT-FOR-PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Apr 03, 2003 8:00 am**  
**Secretary of State**

04-03-2003 90138 034 \*\*\*\*61.25

DOCUMENT # **N95000002550**

1. Entity Name  
**CONTEMPORARY CHINESES SCHOOL OF SOUTH FLORIDA, I  
NC.**



Principal Place of Business  
**23165 OLD INLE BRIDGE DR.  
BOCA RATON FL 33433**

Mailing Address  
**11003 N.W. 18TH PLACE  
PLANTATION FL 33322**

2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State



CHECK HERE IF MAKING CHANGES

Zip Country Zip Country

4. FEI Number **65-0587591**

Applied For  
Not Applicable

**6. Name and Address of Current Registered Agent**

**HE, MATTHEW**  
**11003 N.W. 18TH PLACE  
PLANTATION FL 33322**

**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 *Matthew He* DATE **3/23/03**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)

**FILE NOW: FEE IS \$61.25**

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**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MINGZHOU, DING</b> <b>1301 N.W. 14TH STREET</b> <b>BOCA RATON FL 33486</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HU, QING</b> <b>23165 OLD INLE BRIDGE DR.</b> <b>BOCA RATON FL 33433</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>LI, CHARLIE</b> <b>10889 TAMORON LANE</b> <b>BOCA RATON FL 33498</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>WANG, LISA</b> <b>2 DATRAN CENTER, 9130 S. DADELAND BLVD.</b> <b>MIAMI FL 33156</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HIATONG, DENG</b> <b>6113 S.W. 127TH PLACE</b> <b>MIAMI FL 33183</b>	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>WU, JIE</b> <b>6533 SWEET MAPLE LANE</b> <b>BOCA RATON FL 33433</b>	<input checked="" type="checkbox"/> Delete

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SEE ATTACHED</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SEE ATTACHED</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SEE ATTACHED</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SEE ATTACHED</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: *Matthew He* **REQUIRED** DATE: **3/23/03** **(954) 262-8310**

CR2E037 (10/02)

Attachment for Document #N95000002550

80069966  
南佛州现代中文学校

Contemporary Chinese School of South Florida (CCSSF)

CCSSF Board Directors 2003

Name	Mailing Address	Change
Mr. DeCarlo, Dan	19 Baytree Circle, Boynton Beach FL 33436	Addition
Dr. Ding, Mingzhou	1301 NW 14 <sup>th</sup> Street, Boca Raton FL 33486	No Change
Mr. Gu, Binhe	2754 Penhale Court, Wellington FL 33414	Addition
Dr. He, Matthew (Director)	11003 NW 18 <sup>th</sup> Place, Plantation FL 33322	Addition
Dr. Hu, Qing	23165 Old Inle Bridge Dr. Boca Raton FL 33433	No Change
Dr. Hu, Wenhui	6904 SW 88 ST, F304, Miami FL 33156	Addition
Dr. Lu, Peng	11010 SW 124 Rd, Miami, FL 33176	Addition
Dr. Xu, Rengliang (Chairman)	13084 NW 13 St., Pembroke Pines FL 33028	Addition
Dr. Zhang, Joyce	15920 Lisbon Ct., Wellington FL 33414	Addition

**Delete:**

Li, Charlie, Wang Lisa, Haitong, Deng, Wu, Jie

Thank for updating the CCSSF Officers and Directors.



Dr. Matthew He  
CCSSF Director