

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000001553

1. Entity Name

TEMPLE OF WESTERN PURE LAND INC.

FILED
May 19, 2000 8:00 am
Secretary of State

05-19-2000 90049 023 ****70.00

Principal Place of Business Mailing Address
1829 SIRLANCLOT CIRCLE 1829 SIRLANCLOT CIRCLE
SAINT CLOUD, FL 34772 SAINT CLOUD, FL 34772

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 59-3374719 ☒ Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHU, CHING - CHIH
1829 SIRLANCLOT CIRCLE
SAINT CLOUD, FL 34772

Name SHIH, CHIEN - HSIN
Street Address (P.O. Box Number is Not Acceptable)
8843 LARWIN LANE
City ORLANDO FL Zip Code 32817

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 Chien H Shih SHIH, CHIEN - HSIN 4-20-2000
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 PTDC ☐ Delete
NAME SHIH, CHIEN - HSIN
STREET ADDRESS 8843 LARWIN LANE, ORLANDO, FL 32817
CITY-ST-ZIP

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

TITLE SDC ☐ Delete
NAME CHU, CHING - CHIH
STREET ADDRESS 8843 LARWIN LANE, ORLANDO, FL 32817
CITY-ST-ZIP

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

TITLE D ☐ Delete
NAME WU, HSI - MEI
STREET ADDRESS 8843 LARWIN LANE, ORLANDO, FL 32817
CITY-ST-ZIP

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

TITLE D ☐ Delete
NAME LIN, MEI - HUS
STREET ADDRESS 8843 LARWIN LANE, ORLANDO, FL 32817
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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CITY-ST-ZIP

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)(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: Chien H Shih SHIH, CHIEN - HSIN 4-20-2000 407-678-8074
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)