2000 UNIFORM BUSINESS REPORT (UBR)

SIGNAT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OF

SIGNATURE:

May 05, 2000 8:00 am Secretary of State DOCUMENT # N96000004319 CHINESE AMERICAN CLUB OF MIAMI, INC. 05-05-2000 90032 013 ****70.00 Principal Place of Business Mailing Address 8100 S.W. 92ND COURT 8100 S.W. 92ND COURT MIAMI FL 33173-4108 MIAM! FL 33173 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite. Apt. #. etc. Applied For City & State City & State 4. FEI Number 65-0700522 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) TSAI, JOHN 8100 S.W. 92ND COURT MIAMI FL 33173 City 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. gistered agent and title if applicable Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Change P/D P/o ☐ Addition TITLE ☐ Delete NAME LEE, FEI SZU Tsai, John 8100 s.w. 92 Cour STREET ADDRESS STREET ADDRESS 4778 SW 3 ST CITY-ST-ZIP CITY-ST-ZIP Miani, FL 33173 MIAMI FL 33134 TITLE ☐ Change ☐ Addition TITLE DΝ Delete NAME NAME HUNG, GEORGE STREET ADDRESS STREET ADDRESS 9000 S.W. 83RD ST. CITY-ST-ZIP ~ CITY-ST-ZIP MIAMI FL 33173 Change ☐ Addition TITLE ☐ Delete TITLE D/S NAME NAME WANG, EDWARD STREET ADDRESS STREET ADDRESS 7234 NW 34 ST CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33122 Change ☐ Addition TITLE 🗷 Delete NAME NAME WANG, ALICE STREET ADDRESS STREET ADDRESS 8333 LAKE DR. APT #L-205 CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33166 ☐ Delete TITLE ☐ Addition NAME Lee, FEI SZU NAME tsai, John STREET ADDRESS STREET ADDRESS 4778 S.W. 3 5+rest 8100 S.W. 92ND CT. CITY-ST-ZIP CITY-ST-ZIP <u>MIAMI FL 33173</u> ☐ Addition TITLE D ☐ Delete TITLE NAME NAME LAI, JUDITH STREET ADDRESS STREET ADDRESS 775 NE 195 ST CITY-ST-ZIP CITY-ST-ZIP <u>MIAMI FL 33134</u> 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.

FILED