2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000007123

FILED Jan 11, 2009 Secretary of State

Entity Name: SOUTH FLORIDA TAIWANESE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1831 NW 108TH AVE 10929 N.E. 8 AVE PLANTATION, FL 33322 MIAMI, FL 33161

Current Mailing Address: New Mailing Address:

1831 NW 108TH AVE 10929 N.E. 8 AVE PLANTATION, FL 33322 10929 N.E. 8 AVE

FEI Number: 52-1582817 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HUANG, BEN
1951 NW 22N
FORT LAUDERDALE, FL 33311
US
CHIEN, PAOTSAI
10929 N.E. 8 AVE
MIAMI, FL 33161
US

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: PAOTSAI CHIEN 01/11/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: LIAU, SANDY Name: CHIEN, PAOTSAI

Address: 16806 NW 108 AVE Address: 10929 NE 8 AVE
City-St-Zip: MIAMI LAKES, FL 33016 City-St-Zip: MIAMI, FL 33161

 $\label{eq:title:V} {\sf Title:} \qquad {\sf V} \qquad {\sf ()} \ {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf V} \qquad {\sf (X)} \ {\sf Change} \ {\sf ()} \ {\sf Addition}$

 Name:
 YU, PETER
 Name:
 WEN, JUDY

 Address:
 15020 SW 132 AVE
 Address:
 7600 SW 116 ST

 City-St-Zip:
 MIAMI, FL 33186
 City-St-Zip:
 MIAMI, FL 33156

 $\label{eq:title:P} {\sf Title:} \qquad {\sf P} \qquad (\) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf T} \qquad ({\sf X}) \, {\sf Change} \, (\) \, {\sf Addition}$

 Name:
 LIN, JACK
 Name:
 LIN, NEWMAN K

 Address:
 1831 NW 108TH AVE
 Address:
 22648 SW 54 AVE

 City-St-Zip:
 PLANTATION, FL 33322
 City-St-Zip:
 BOCA RATON, FL 33433

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAOTSAI CHIEN P 01/11/2009