.2000 UNIFORM BUSINESS REPORT (UBR) RHED DOCUMENT # N9900001687 Jul 26, 2000 8:00 am 1. Entity Name **Secretary of State** THUBTEN CHOELING, INC. 07-26-2000 90043 018 ****61.25 Mailing Address Principal Place of Business 1940 N.E. 159TH STREET 1940 N.E. 159TH STREET NORTH MIAMI BEACH FL 33162 NORTH MIAMI BEACH FL 33162 2. Principal Place of Business 2732 N.E. 22 nd Au 3. Mailing Address 2732 N.E. ZZnd Ave DO NOT WRITE IN THIS SPACE 4. FEJ Number 65-0926271 Applied For City & State anthouse Not Applicable \$8.75 Additional 5. Certificate of Status Desired Rroward roward Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Patrick 105016 Street Address (P.O. Box Number is Not Acceptable) THUPTEN, T C 1940 N.E. 159TH STREET N.E. 22nd Ave. NORTH MIAMI BEACH FL 33162 Zip Code 33064 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 (NOTE: Registered Agent signature required when reinstating) of registered agent and title if applicab FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** After September 13, 2000 min. will be \$236.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Director Delete TITLE TITLE Change Addition Pema Chhinjor 2420 Lombard Street LAMAS, MILI NAME NAME STREET ADDRESS 1130 N.W. 30TH COURT STREET ADDRESS CITY-ST-ZIP San Francisco CA 94123-0260 CITY-ST-ZIP **MIAMI FL 33125** TITLE ☐ Delete TITI F ☐ Change ☐ Addition RABTEN, SENGE NAME NAME STREET ADDRESS 2732 N.E. 22ND AVE. STREET ADDRESS CITY-ST-ZIP CITY-ST-7/F LIGHTHOUSE POINT FL 33064 TITLE Delete TITLE ☐ Change Addition THUPTEN, T C NAME NAME STREET ADDRESS 1940 N.E. 159TH STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **NORTH MIAMI BEACH FL 33162** ☐ Change Delete TITLE ☐ Addition TITLE THUPTEN, KELSANG D NAMÉ NAME 1940 N.E. 159TH STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C/TY-ST-7IP NORTH MIAMI BEACH FL 33162 Delete TITLE ☐ Change ☐ Addition TITLE DE VOSJOLI, PATRICK NAME NAME STREET ADDRESS STREET ADDRESS 2732 N.E. 22ND AVE. CITY-ST-78 CITY-ST-ZIP LIGHTHOUSE POINT FL 33064 ☐ Delete TITLE ☐ Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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), Fiorida 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

SIGNATURE: SIGNATURE NO PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date Dayline Phone

changed, or on an attachment with an address, with all other like empowered.