

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000001687

1. Entity Name

THUBTEN CHOELING, INC.

**FILED**  
**Apr 03, 2002 8:00 am**  
**Secretary of State**

04-03-2002 90571 001 \*\*\*361.25

007227

Principal Place of Business

2732 NE 22ND AVE  
POMPANO BEACH FL 33064

Mailing Address

P.O. BOX 5640  
POMPANO BEACH FL 33074

2. Principal Place of Business

1791 Blount Road

3. Mailing Address

Suite, Apt. #, etc.

Suite 719

City & State

Pompano Beach FL

City & State

Zip  
33069

Country  
USA

Zip

Country

4. FEI Number

65-0926271

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

VOSJOLC, PATRICK  
2732 NE 22ND AVE  
POMPANO BEACH FL 33064

7. Name and Address of New Registered Agent

Name  
Patrick de Vosjoli  
Street Address (P.O. Box Number is Not Acceptable)  
1314 E. Las Olas Blvd.  
Suite 1111  
City  
Fort Lauderdale FL Zip Code  
33301

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/27/2002

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
RABTEN, SENGE  
2732 N.E. 22ND AVE.  
LIGHTHOUSE POINT FL 33064 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
DE VOSJOLI, PATRICK  
2732 N.E. 22ND AVE.  
LIGHTHOUSE POINT FL 33064 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
CHHINJOR, PEMA  
2420 LOMBARD STREET  
SAN FRANCISCO CA 94123 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition  
PO Box 5640  
Lighthouse Point FL 33074

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☐ Addition  
1314 E. Las Olas Blvd. Suite 1111  
Fort Lauderdale FL 33301

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

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

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

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patrick de Vosjoli

Date

3/27/2002

Daytime Phone #

954-525-8811

CR2E037 (9/01)