

2000 UNIFORM-BUSINESS REPORT (UBR)

5/3.

DOCUMENT # N99000001743

1. Entity Name

SINO-AMERICA CULTURAL & EDUCATIONAL PROMOTION CO

FILED
Jun 01, 2000 8:00 am
Secretary of State

05-03-2000 90081 019 ****61.25

Principal Place of Business

207 LARSON AVE.
BRANDON FL 33510

Mailing Address

207 LARSON AVE.
BRANDON FL 33510-3410

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

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHEN, RUTH
207 LARSON AVE.
BRANDON FL 33510

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

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

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

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TITLE
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CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

(D) FLORIDA COORDINATOR ☐ Change ☒ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

Suehen Smith
11510 RIVER COUNTRY
RIVERVIEW, FL 33569

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

(T) RUTH CHEN
207 LARSON AVE
BRANDON, FL 33510

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

(T) DIRECTOR AND V.P.
ABE YU
14087 SW 48TH LANE
MIAMI, FL 33175-4830

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

(T) PRESIDENT
SU CHENG
#8 GAO-PENG PARKWAY, CHENG-DU
TIE CHUAN - CHINA 610041

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

(D) GUO-ZHI ZHANG
#1 BALI-CHUAN RD
CHENG-DU, CHINA 610051

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

Date

Daytime Phone #

CR2E037 (9/99)