FILED

Feb 12, 2003 8:00 am

Secretary of State

02-12-2003 90082 005 ***150 00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

DOCUMENT

P00000008988

1. Entity Name

HO HING ENTERPRISES, INC



Mailing Address Principal Place of Business 1530 W BRANDON BLVD 1530 W BRANDON BLVD BRANDON FL 33511 BRANDON FL 33511 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES Applied For City & State City & State 4. FEI Number 59-3615324 Not Applicable Country \$8.75 Additional Zip Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name _ KUNG, TUNG HING Street Address (P.O. Box Number is Not Acceptable) 1528 W. BRANDON BLVD **BRANDON FL 33511** Zip Code City 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. I am familiar with, and accept the obligations of registered agent. 2-8-03 SIGNATURE (NOTE: Registered Agent signature required when reinstating) ped or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State . - OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. 10. Change Addition Delete TITLE TIÎLE LAI, YANG R. NAME NAME 1528 W BRANDON BLVD STREET ADDRESS STREET ADDRESS BRANDON FL 33511 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME CHEN, ZHAO L 1528 W BRANDON BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BRANDON FL 33511** CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME KUNG,-TUNG H NAME STREET ADDRESS STREET ADDRESS 1528 W BRANDON BLVD CITY-ST-7(P **BRANDON FL 33511** CITY-ST-ZIP ☐ Addition ☐ Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change TITLE Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ 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), 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 607, 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.