# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**
**May 21, 2002 8:00 am**
**Secretary of State**
05-21-2002 91235 002 ***150.00

DOCUMENT # P00000047997 ✓

1. Entity Name

LEIMAN TRIM SERVICES, INC.

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000443

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| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| 6921 ENVIRON BLVD. | 6921 ENVIRON BLVD. |
| Suite, Apt. #, etc.: # 5N | Suite, Apt. #, etc.: # 5N |
| City & State: LAUDERHILL, FL. | City & State: LAUDERHILL FL. |
| Zip: 33319 Country: USA | Zip: 33319 Country: USA |

4. FEI Number: 65-1007956 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: NGUYEN - CHIONG

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

6921 ENVIRON BLVD. #5N

City: LAUDERHILL FL Zip Code: 33319

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] NGUYEN CHIONG 4/30/02
Signature, typed or printed name of registered agent and title if applicable (Florida Department of State signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

**January 1 - May 1 Fee is $150.00**
**After May 1, Fee is $550.00**
**Amended UBR is $61.25**
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | PS |
| NAME | CHIONG, NGUYEN |
| STREET ADDRESS | 6921 ENVIRON BLVD #5N |
| CITY-ST-ZIP | LAUDERHILL, FL. 33319 |
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CR2E0348 (12/01)

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] NGUYEN CHION 4/30/02 (786)306-1890
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #