## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

C/O LOPEZ ACCOUNTING

## DOCUMENT # P0000062402

1. Entity Name

5411 NW 163RD ST

**SIGNATURE:** 

Principal Place of Business

CHOU'S INTERNATIONAL CORP.



FILED May 01, 2003 8:00 am Secretary of State

05-01-2003 90336 014 \*\*\*150.00

MIAMI FL 3301	14		1800 W 49 ST. #121 HIALEAH FL 33012									
2. Principal F	Place of Busin	ness	3. Mailing Address							!  <b>     </b>		1110 IISI 1831
Suite, Apt.	#, etc.		Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES				
City & Stat	e	City & State				4.	. FEI Number	65-1022051			pplied For ot Applicable	
Zip	Country				Coun	Country		. Certificate of S	Status Desired		\$8.75 Add Fee Require	
6. Name and Address of Current Registered Agent							7.	Name and Ad	dress of New F	Registered .	Agent	
CHOU, KU 5411 NW MIAMI FL	163RD ST					Name Street Address (P.O. Box Number is Not Acceptable)						
					City FL Zip Code							
the obligat	named entitions of regist	y submits this statement for ered agent.	r the purpos	e of changing its	registere	ed office or	registered a	agent, or both, in	n the State of Fk	orida. I am	familiar with,	and accept
SIGNATURE .	Signature, typed	or printed name of registered agent a	and title if applica	ble. (NOTÉ	: Registered	Agent signatur	e required when	reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State								Trust F	on Campaign Fig	ın. E	Added	0 May Be to Fees
10.	00	OFFICERS AND	DIRECTORS		11.			ADDITIONS/CH	ANGES TO OFF	ICERS AND		
NAME STREET ADDRESS	PD CHOU, KU 5411 NW 1 MIAMI FL (	ng h 163RD St		☐ Delete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete		1					☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				□ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete							Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP				Delete							☐ Change	Addition
indicated of the cor	on this repor poration or th	e information supplied with t or supplemental report is the receiver or trustee empo the inchange of the incha	true and ac wered to ex	curate and that mecute this report a	y signat	ure shall ha	ve the same	e legal effect as	if made under i	oath; that I a e appears i	am an officer	or director