FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Mar 12, 2001 8:00 am DOCUMENT # P0000095041 **Secretary of State** 1. Entity Name **ASIAN TREASURES INC.** 03-12-2001 90483 004 ***158.75 Principal Place of Business Mailing Address C0033097 2. Principal Place of Business 155 NE 30 DO NOT WRITE IN THIS SPACE City & State City & State Applied For =WRIDA 65-MAIM Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agen 7. Name and Address of New Registered Agent ---SAME HAMBLEY, RICHARD 345 OCEAN DR APT.#623 MIAMI BEACH Street Address (P.O. Box Number is Not Acceptable) City 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Addition B SECRETARY / TREASURER Delete TITI F Change TITLE HAMBLEY, RICHARD NAME NAME STREET ADDRESS 800 WEST AVENUE #540 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33139 Addition President [] Change TITLE Delete TITLE NAME NAME NOA MICHAEL STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITI F ☐ Change **Addition** TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change [Addition TITLE ☐ Delete NAME RICHARD HAMBLEY NAME 345 OCEAN DRIVE APT #623 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL. ☐ Delete TITLE Change ☐ Addition TITLE: NAME -NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 Block 12 if changed, or on an attachment with an address, with all other like empowered.