

**2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # **P00000095877**

1. Entity Name

**GENERAL APPLIANCE (USA), INC.****FILED**  
**Jun 20, 2002 8:00 am**  
**Secretary of State**

06-20-2002 90057 027 \*\*\*150.00

Principal Place of Business

**152 NE. 167TH ST., #270  
N. MIAMI BEACH FL 33162**

Mailing Address

**152 NE. 167TH ST., #270  
N. MIAMI BEACH FL 33162**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**65-1058975**

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

**CHANG, ANTHONY****152 NE. 167TH ST., #270  
N. MIAMI BEACH FL 33162**

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

9. This corporation is eligible to satisfy its intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**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	NAME	STREET ADDRESS	CITY-ST-ZIP
	<b>D</b>		<input type="checkbox"/> Delete
	<b>ZHENG, YUAN BAO</b>	<b>CHANG HONG VILLAGE, LIU SHI TOWN, LE QING</b>	
		<b>ZHE JIANG PROVINCE, CHINA</b>	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	<b>D</b>		<input type="checkbox"/> Delete
	<b>YE, WU XIN</b>	<b>TU KUANG VILLAGE, HAN YE TOWN, LIU SHI</b>	
		<b>LE QING, ZHE JIANG PROVINCE CHINA</b>	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	<b>D</b>		<input type="checkbox"/> Delete
	<b>YE, LIN</b>	<b>LN. 45, SHI HUANG RD, LIU SHI TOWN, LE QING</b>	
		<b>ZHE JIANG PRMICE, CHINA</b>	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	<b>D</b>		<input type="checkbox"/> Delete
	<b>CHANG, ANTHONY</b>	<b>11133 NW 2N COURT</b>	
		<b>CORAL SPRINGS FL 33071</b>	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
			<input type="checkbox"/> Delete

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
			<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
			<input type="checkbox"/> Change <input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
			<input type="checkbox"/> Change <input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
			<input type="checkbox"/> Change <input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
			<input type="checkbox"/> Change <input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
			<input type="checkbox"/> Change <input type="checkbox"/> Addition

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
			<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 employees.

SIGNATURE

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

Attachment  
Document #  
P00000095877

870174

June 2, 2002

GENERAL APPLIANCE (USA), INC.  
152 NE. 167TH ST., #270  
N. MIAMI BEACH, FL 33162

RE-MAILED

6/12/02

Subject: GENERAL APPLIANCE (USA), INC.

Reference Number: P00000095877

Please be advised, we have received your annual report/uniform business report; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please sign and return your check submitted with the annual report/uniform business report.

**TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.**

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/AM  
ANNUAL REPORTS SECTION