

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 10, 2001 8:00 am
Secretary of State

07-10-2001 90120 033 ***150.00

DOCUMENT # P00000108071

1. Entity Name

SUSHI MASTER, INCORPORATED

Principal Place of Business

3231 CRYSTAL CREEK
 ORLANDO FL 32837

Mailing Address

3231 CRYSTAL CREEK
 ORLANDO FL 32837

A0076317

2. Principal Place of Business

3231 crystal creek

Suite, Apt. #, etc.

ORLANDO, FL

City & State

32837

Zip

Country

ORANGE

3. Mailing Address

3231 crystal creek

Suite, Apt. #, etc.

ORLANDO, FL

City & State

32837

Zip

Country

ORANGE

4. FEI Number

59-3682430

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

XIE, XUANXIN

3231 CRYSTAL CREEK
 ORLANDO FL 32837

7. Name and Address of New Registered Agent

Name

XIE, XUANXIN

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

3231 crystal creek

ORLANDO, FL

City

FL

Zip Code

32837

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

Xuanxin Xie

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, 2001 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	PO	☐ Delete
NAME	XIE, XUANXIN	
STREET ADDRESS	3231 CRYSTAL CREEK	
CITY-ST-ZIP	ORLANDO FL 32837	
TITLE	SD	☐ Delete
NAME	ZHUANG, FENGXIA	
STREET ADDRESS	3231 CRYSTAL CREEK	
CITY-ST-ZIP	ORLANDO FL 32837	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
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.

SIGNATURE:

Xuanxin Xie

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-01

Date

Corporate Phone #

CR2E034 (10/00)