FILED

2003 FOR PROFIT CORPORATION

Jan 29, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR Secretary of State** P00000114167 **DOCUMENT #** 01-29-2003 90189 033 ***150.00 SUSHI HOUSE OF JACKSONVILLE, INC. Principal Place of Business Mailing Address 9810 **BAYMEADOWS ROAD** 9810 BAYMEADOWS ROAD #12 JACKSONVILLE FL 32256 JACKSONVILLE FL 32256 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 59-3686465 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name - : QIU. HEYING Street Address (P.O. Box Number is Not Acceptable) 9810 BAYMEADOWS ROAD #12 JACKSONVILLE FL 32256 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be · After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. CR2E034 (10/02) TITLE ☐ Delete TITLE ☐ Addition QIU, HEYING NAME NAME STREET ADDRESS 9810 BAYMEADOWS ROAD STREET ADDRESS JACKSONVILLE FL 32256 CITY-ST-ZIP CITY-ST-ZIP VΡ ☐ Change ☐ Addition TITLE TITLE Delete NAME QING, CHEN DE NAME STREET ADDRESS 9810 BAYMEADOWS ROAD STREET ADDRESS CITY-ST-ZIP JACKSONVILLE FL 32256 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

CITY-ST-ZIP CITY-ST-ZIP 12. 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 10 or Block 11 if

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