

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90241 029 ***150.00

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

DOCUMENT # P0100038770		
1. Entity Name BRIDGEAST INT'L, INC.		
Principal Place of Business 14131 BARONESS COURT ORLANDO, FL 32828		Mailing Address 14131 BARONESS COURT ORLANDO, FL 32828
2. Principal Place of Business		3. Mailing Address <i>Suite 1816</i>
Suite, Apt. #, etc. <i>Suite 1816, 8505 Milano Dr.</i>		Suite, Apt. #, etc. <i>8505 Milano Dr.</i>
City & State <i>Orlando, FL</i>		City & State <i>Orlando, FL</i>
Zip <i>32810</i>		Country <i>U.S.A.</i>
4. FEI Number 59-3711226		☐ CHECK HERE IF MAKING CHANGES ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent WANG, YAYING 14131 BARONESS COURT ORLANDO, FL 32828		7. Name and Address of New Registered Agent 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. 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's signature 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		
9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS		
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
12. I hereby certify that the information supplied on 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 changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: <i>[Signature]</i> 4/28/03 (407) 475-9602		

CR2E034 (10/02)