2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

Apr 07, 2002 8:00 am Secretary of State P01000041663 DOCUMENT # 1. Entity Name 02-24-2002 90031 028 ***150 00 TUNG FANG INTERNATIONAL, INC. Principal Place of Business Mailing Address 21037 1551 LEE ROAD 1551 LEE ROAD ORLANDO FL 32810 ORLANDO FL 32810 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Žip 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 DAN= ZHANG, JIAN X Street Address (P.O. Box Number is Not Acceptable) 1551 LEE ROAD ORLANDO FL 32810 1551 LEE ROAD Zip Code ORLANDO 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 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, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS .11. 12. DP Delete ■ Addition TITLE TITLE CR2E034 (9/01 DAN LI ZHANG, JIAN X NAME NAME ISTI LEE ROAD 1551 LEE ROAD STREET ADDRESS STREET ADDRESS CITY-ST-7IP ORLANDO FL 32810 CITY-ST-7IP <u>orlando fl 32810</u> 📕 Delete ITILE D۷ TITLE Change ☐ Addition ZUO ZHOU, KAN NAME NAME LEE ROAD STREET ADDRESS 1551 LEE ROAD STREET ADDRESS CITY-ST-ZIP ORLANDO FL 32810 CITY-ST-ZIP ORLANDO 32810 TITLE Delete TITLE Change ■ Addition 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 CITY-ST-ZIP ☐ Delete [] Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST-ZIP 13. I hereby certify that the information supplied with this filling 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 cath; 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 employered.

FILED