

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 23, 2002 8:00 am**  
**Secretary of State**  
 05-23-2002 90072 048 \*\*\*150.00

**DOCUMENT # P01000060730**  
 1. Entity Name  
**WINTER SPRINGS CHINA GARDEN, INCORPORATED**

Principal Place of Business Mailing Address  
**8919 HERITAGE BAY CIRCLE 8919 HERITAGE BAY CIRCLE**  
**ORLANDO FL 32836 ORLANDO FL 32836**



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-3724618** Applied For  
 Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**HUANG, YU E**  
**8919 HERITAGE BAY CIRCLE**  
**ORLANDO FL 32836**

7. Name and Address of New Registered Agent

Name **Guo Yong Huang**  
 Street Address (P.O. Box Number is Not Acceptable)  
**8919 HERITAGE Bay Circle**  
 City **ORLANDO** FL Zip Code **32836**

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 *Guo Yong Huang* DATE **4-26-02**  
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 **SD** ☒ Delete  
 NAME **HUANG, YU E**  
 STREET ADDRESS **8919 HERITAGE BAY CIRCLE**  
 CITY-ST-ZIP **ORLANDO FL 32836**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P.O.** ☒ Change ☐ Addition  
 NAME **HUANG, GUO YONG**  
 STREET ADDRESS **8919 HERITAGE BAY CIRCLE**  
 CITY-ST-ZIP **ORLANDO, FL 32836**

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

TITLE ☐ Change ☐ Addition  
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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: *Guo Yong Huang* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **Guo Yong Huang - President** DATE **4-26-02** DAYTIME PHONE # **407-327-2003**

CR2E034 (9/01)