

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000070311

1. Entity Name

LAU & WU, INC.

FILED

02 AUG 13 AM 8:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

3414 S UNIVERSITY DRIVE
DAVIE, FL 33328

Mailing Address

3414 S UNIVERSITY DRIVE
DAVIE, FL 33328

2. Principal Place of Business

3414 S UNIVERSITY DR.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

DAVIE FLORIDA

City & State

4. FEI Number

65-1124013

Applied For

Not Applicable

Zip

33328

Country

BROWARD

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

WU, GUO-SI
3414 S UNIVERSITY DRIVE
DAVIE, FL 33328

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.

SIGNATURE

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, 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 P
NAME LAU, YI KUM ☒ Delete
STREET ADDRESS 3414 S UNIVERSITY DRIVE
CITY-ST-ZIP DAVIE, FL 33328

TITLE S
NAME WU, GUO-SI ☒ Delete
STREET ADDRESS 3414 S UNIVERSITY DRIVE
CITY-ST-ZIP DAVIE, FL 33328

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 P ☐ Change ☒ Addition
NAME CHEUNG, WAI MING
STREET ADDRESS 3414 S UNIVERSITY DRIVE
CITY-ST-ZIP DAVIE, FL 33328

TITLE ☐ Change ☐ Addition
NAME 800007174648-3
STREET ADDRESS -08/16/02--01078--008
CITY-ST-ZIP *****61.25 *****61.25

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: *X [Signature] Lau president*

08/07/02

CR2E034 (9/01)