

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

**FILED**  
**Jun 20, 2002 8:00 am**  
**Secretary of State**

06-20-2002 90056 036 \*\*\*150.00

DOCUMENT # PO/000076045

1. Entity Name

XIAO WEI, INC.

**DO NOT WRITE IN THIS SPACE**

870114

2. Principal Place of Business

3. Mailing Address

2698 N MONROE STREET 17 E. BROADWAY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#205

DO NOT WRITE IN THIS SPACE

City & State  
TALLAHASSEE FL

City & State  
NEW YORK NY

4. FEI Number  
58-2663644

Applied For  
Not Applicable

Zip  
32303

Country

Zip

10008

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name  
MING CHANG WANG

Street Address (P.O. Box Number is Not Acceptable)

2698 N MONROE STREET

City  
TALLAHASSEE

FL

Zip Code  
32303

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

6/13/02

DATE

9. This corporation is eligible to satisfy its Intangible  
Tax filing requirement and elects to do so.  
(See criteria on back) ☐

January 1 - May 1 Fee is \$150.00  
After May 1, Fee is \$550.00  
Amended UBR is \$61.25

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PRESIDENT  
MING CHANG WANG  
2698 N MONROE STREET  
TALLAHASSEE FL 32303

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VICE-PRESIDENT  
YU TUD ZHENG  
2698 N MONROE STREET  
TALLAHASSEE FL 32303

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
TREASURER  
MING CHUN ZHENG  
2698 N MONROE STREET  
TALLAHASSEE FL 32303

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SECRETARY  
CHUN HUA WANG  
2698 N MONROE STREET  
TALLAHASSEE FL 32303

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/13/02

Date

Daytime Phone #

CR2E034B (12/01)