

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 14, 2002 8:00 am**  
**Secretary of State**

02-14-2002 90011 040 \*\*\*150.00

**DOCUMENT # P01000082511**

1. Entity Name  
**CHINESE PAVILION, INC.**

Principal Place of Business  
**12210 BISCAYNE BOULEVARD**  
**NORTH MIAMI FL 33161**

Mailing Address  
**12210 BISCAYNE BOULEVARD**  
**NORTH MIAMI FL 33161**

2. Principal Place of Business  
**12210 BISCAYNE BLVD.**

3. Mailing Address  
**12210 BISCAYNE BLVD**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
**N. MIAMI FL**

City & State  
**N. MIAMI FL**

4. FEI Number  
**65-1152776**

Applied For  
 Not Applicable

Zip  
**33181**

Country  
**DADE**

Zip  
**33181**

Country  
**DADE**

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**-KENNETH, CHANG**  
**561 NE 79TH STREET**  
**207**  
**MIAMI FL 33138**

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**P**  
**CHANG, ALFONSO**  
**6330 SW 148 AVENUE**  
**FT. LAUDERDALE FL 33330**

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

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**S**  
**ANTONIETA CHANG**  
**6330 SW 148 AVENUE**  
**FORT LAUDERDALE, FL 33330**  
☐ Change ☒ Addition

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

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

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☐ Change ☐ Addition

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:

**SIGNATURE REQUIRED: ALFONSO CHANG PRES 1-30-02 (305) 893-5250**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)