

FILED
Apr 24, 2002 8:00 am
Secretary of State

04-24-2002 90378 025 ***150.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01006088122

1. Entity Name

MR. JIANG'S COMPANY

Principal Place of Business

16892 US HYW 41
MOUNT DORA, FL 32757

Mailing Address

539 N MILLS AVE
ORLANDO, FL 32803

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

DO NOT WRITE IN THIS SPACE

Zip

Country

Zip

Country

4. FEI Number

02-0558550

Applied For
Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

X Dian Sheng Jiang

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

NOTE: Registered Agent signature required when resigning.

Date

8. MANAGING MEMBERS/MEMBERS

9. ADDITIONS/CHANGES

8. MANAGING MEMBERS/MEMBERS		9. ADDITIONS/CHANGES	
TITLE	NAME STREET ADDRESS CITY-ST-ZIP	TITLE	NAME STREET ADDRESS CITY-ST-ZIP
President	DIAN SHENG JIANG 16892 US HYW 41 MOUNT DORA, FL 32757	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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ORDERS (1/1/02)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(D), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the said liability company or the receiver or trustee empowered to execute this report as required by Chapter 609, Florida Statutes.

SIGNATURE:

X Dian Sheng Jiang

SIGNATURE AND TYPED OR PRINTED NAME OF BUSINESS MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Corporate Printout #