

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000015790

1. Entity Name
CHINA FIRST, INC.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 FEB -4 PM 1:45

Principal Place of Business
400 SE CAPITAL CIR. 23-25
TALLAHASSEE, FL 32301

Mailing Address
400 SE CAPITAL CIR. 23-25
TALLAHASSEE, FL 32301

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

☒ Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LI, YI YONG
5608 MAIZE CT.
TALLAHASSEE, FL 32317

7. Name and Address of New Registered Agent

Name **XIE, XIANG DONG**

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

400 SE CAPITAL CIR #24

City **TALLAHASSEE**

FL

Zip Code **32301**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Xie Xiang Dong**
Signature, typed or printed name of registered agent and file if applicable.

(NOTE: Registered Agent's signature required when reinstating)

2/4/03

DATE

FILE NOW!!! FEE IS \$160.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **LI, YI YONG**
STREET ADDRESS **5608 MAIZE CT.**
CITY-ST-ZIP **TALLAHASSEE, FL 32317**

TITLE **D** ☐ Delete
NAME **ZHENG, ZHI HANG**
STREET ADDRESS **4665 NESTING TRAIL**
CITY-ST-ZIP **TALLAHASSEE, FL 32311**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Change ☒ Addition
NAME **XIE, XIANG DONG**
STREET ADDRESS **400 SE CAPITAL CIR #24**
CITY-ST-ZIP **TALLAHASSEE FL 32301**

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

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

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NAME
STREET ADDRESS
CITY-ST-ZIP

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02/04/03--01084--001 **150.00

CR2E034 (10/02)

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Xie Xiang Dong**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #