2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT



FILED Mar 20, 2003 8:00 am Secretary of State

Mailing Actions Mailing Ac	1. Entity Na	OU, INC.	# PU2UC	1002116				03-20-2003 90123 035 ***150.00		
Suite, Apt. #, etc. Suite, Apt. #, etc. CHECK HERE F MAKING CHANGES PT CADDERDALE, FL PT CADDERDALE, FL PT CADDERDALE, FL PT CADDERDALE, FL A FEI Number O3-0398652 A Popled For Sand Decided Pt Sand	#41 CORAL SPRI	MPLE ROAD. NGS FL 33065 Place of Busin	ness	#41 CORAL SPRING	LE ROAD. 3 FL 33065	/D				
Month Mont				Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES		
See Required Fee			<u> </u>	City & State FT LAUDERDALE, FL				03-0398652		
YU JIN, LU 11471 W. SAMPLE ROAD #41 CORAL SPRINGS FL 33065 8. The above named entity submits this statement for the purpose of charging its registered office or registered agent, or both, in the State of Florida. I am familier with, and access the cobing alone of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 FILE NOW!!! THE STATE OFFICERS AND DIRECTORS IN 11 FILE NOW!!! THE CORAL SPRINGS FL 33065 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 FILE NOW!! THE CORAL SPRINGS FL 33065 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 FILE NOW. FILE NOW!!! THE CORAL SPRINGS FL 33065 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 FILE NOW. FILE NOW!! THE CORAL SPRINGS FL 33065 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 FILE NOW. F	2ip Country Zip Co 33308 U						Ţ	5. Certificate of Status Desired \$8.75 Additional		
YU JIN, LU 11471 W. SAMPLE ROAD #41 CORAL SPRINGS FL 33065 8. The above named only 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 access the chologistic florida beginning to prove named inequitors operative the subject of provent named inequitors operative to the subject of provent named inequitors of provent named inequitors operative to the subject of provent named inequitors of provent named ineq		6. Name	and Address of Current	Registered Agent						
11471 W. SAMPLE ROAD #41 CORAL SPRINGS FL 33065 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 acceptable) SIGNATURE Signature, hypid or printed rame of registered agent ag	VIII IIM I		المعالم المعاددة للسياسات	يجيعون بالمسود		Name	والمستوية والأمال			
CORAL SPRINGS FL 33065 City T LAUDERDALE FL Zip Code 33308 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 familier with, and access the Applications of registered agent. SIGNATURE SIGNATURE FILE NOW!!! FEE IS 5150.00 After May 1, 2003 Fee will be \$550.00 After Adoption Scale F	·						Street Address (P.O. Box Number is Not Acceptable)			
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am familiar with, and access the volotigations of registered agent. SIGNATURE Signatum, typed or printed agent and life if applicable. (NOTE: Registered Agent alignature required when rematicing) PULLIN, LU TITLE MAKE SIRRET ADDRESS CITY-51-2P TITLE MAKE SIRRET ADD					t		7 11.	OCHAY BLYD		
SIGNATURE Squature, typed or printed rainer of registered agent. Change Chang	CORAL SPRINGS FL 33065					City LAUDEDDALE EL Zip Code				
SIGNATURE Signature, typed or printed name of registered appert and title of applicable (NOTE:Registered Agent signature required when reintating) DATE	8. The above	e named entity	submits this statement for	the purpose of cha	nging its registered	d office or	registered	d agent, or both, in the State of Florida. Lam familiar with, and acce		
FILE NOW!! FEEL \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE PYU JIN, LU 11471 W. SAMPLE ROAD, #41 CORAL SPRINGS FL 33065 Dekide ITTLE NAME STREET ADDRESS CITY-ST-2PP TITLE NAME STREET ADDRESS CITY-ST-2PP STREET ADDRESS CITY-ST-2PP STREET ADDRESS CITY-ST-2PP STREET ADDRESS CITY-ST-2PP STREET ADDRESS STREET A	the obliga	tions of registi	ered agent.				Ü	Solve and acceptance of the state of the sta		
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITILE MAME CITY-ST-ZIP TITLE MAME SIRECT ADDRESS CITY-ST-ZIP MAME SIRECT ADDRESS CITY-ST-ZIP TITLE MAME SIRECT ADDRESS SIRECT	SIGNATURE	Signature, typed of	or printed name of registered agent a	nd title if applicable.	(NOTE: Registered	Anent signati	ure required wh	hor crimetalism		
After May 1, 2003 Fee will be \$550.00 May Be Make Check Payable to Florida Department of State 10.	· · · · · · · · · · · · · · · · · · ·	II E NOWIII	EEE 9 6150 00	·····			To required with	DATE		
Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE NAME PYU JIN, LU 11471 W. SAMPLE ROAD, #41 CORAL SPRINGS FL 33065 Delete Delete TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADD								9. Election Campaign Financing \$5.00 May Be		
TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-S	Make Check	k Payable to	Florida Department of	State						
MAME VU JIN, LU 1471 W. SAMPLE ROAD, #41 CORAL SPRINGS FL 33065	10.	- <u></u>	OFFICERS AND [DIRECTORS	11.			ADDITIONS/CHANGES TO DEFICERS AND DIRECTORS IN 11		
TO JIN, LO CITY-ST-ZIP TOTAL CORAL SPRINGS FL 33065 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STRE		١,		□ Del	ete TITLE	, l	PS			
CITY-ST-ZIP CORAL SPRINGS FL 33065 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET	_				NAME			U JIN		
TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS C		T114/1 W. S	SAMPLE ROAD, #41			1				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP		CONAL SPI	HINGS FL 33065		CITY-S	T-ZIP	FT LA	AUDERDALE, FL 33308		
STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				☐ Dele			• '	☐ Change ☐ Addition		
CITY-ST-ZIP										
TITLE Delete TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME N	CITY-ST-ZIP				•					
NAME NA	TITLE		· · · · · · · · · · · · · · · · · · ·	□ Dele				Change Dates		
STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS		·—·				- 1		Change Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		l			STREET	ADDRESS				
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	———i				CITY-S	T-ZIP				
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS				☐ Dele		- 1		☐ Change ☐ Addition		
CITY-ST-ZIP TITLE NAME STREET ADDRESS						*DDDE00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	CITY-ST-ZIP									
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	TITLE			□ Dele	te TiTl F		-			
CITY-ST-ZIP CITYE Delete TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	NAME			D016		1		☐ Change ☐ Additio		
CITY-ST-ZIP CITY-ST-ZIP TITLE NAME STREET ADDRESS TITLE NAME STREET ADDRESS						ADORESS				
NAME Change Addition STREET ADDRESS TYPE ADDRESS	CITY-ST-ZIP							•		
NAME STREET ADDRESS STREET ADDRESS			***	☐ Delet	e TITLE	$\neg \neg$		☐ Change ☐ Additio		
STREET ADDRESS					NAME			L Criange Moditor		
□ 077/ AP □					STREET A	ADDRESS				
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 least of the sa	,,,,,,,,,	<u> </u>		-,						

of the corporation or the receiver or trustee erropowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE: _