

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 27, 2003 8:00 am**  
**Secretary of State**

01-27-2003 90227 031 \*\*\*150.00

**DOCUMENT # P02000115645**

**1. Entity Name**  
**CHINA GOURMET II CORPORATION**



**Principal Place of Business**  
**20301 GRANDE OAKS BLVD**  
**SUITE 102**  
**ESTERO FL 33928**

**Mailing Address**  
**20301 GRANDE OAKS BLVD**  
**SUITE 102**  
**ESTERO FL 33928**



**2. Principal Place of Business**

*20301 Grande Oaks Blvd Same*

**Suite, Apt., #, etc.**

*#102*

**City & State**

*Estero*

**Zip**

*33928*

**Country**

**3. Mailing Address**

*Same*

**Suite, Apt., #, etc.**

*FL*

**City & State**

*FL*

**Zip**

*33928*

**Country**

☒ **CHECK HERE IF MAKING CHANGES**

**4. FEI Number**

*571138850*

**Applied For**

**Not Applicable**

**5. Certificate of Status Desired**

☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**LIANG, BRIAN**  
**1226 E. COLONIAL DRIVE**  
**SUITE B**  
**ORLANDO FL 32803**

**7. Name and Address of New Registered Agent**

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

**SIGNATURE**

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

(NOTE: Registered Agent signature required when reinstating)

**DATE**

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003, Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

**9. Election Campaign Financing**

**\$5.00 May Be**

**Trust Fund Contribution**

☒ **Added to Fees**

**10. OFFICERS AND DIRECTORS**

**TITLE** *PD*  
**NAME** *LIU, YUN BI*  
**STREET ADDRESS** *20301 GRANDE OAKS BLVD, #102*  
**CITY - ST - ZIP** *ESTERO FL 33928*

☐ **Delete**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** *PD*  
**NAME** *LIU, YUN BI*  
**STREET ADDRESS** *20301 GRANDE OAKS BLVD #102*  
**CITY - ST - ZIP** *ESTERO FL 33928*

☐ **Change** ☐ **Addition**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

☐ **Delete**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

☐ **Change** ☐ **Addition**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
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☐ **Delete**

**TITLE**  
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☐ **Change** ☐ **Addition**

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☐ **Change** ☐ **Addition**

**TITLE**  
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**STREET ADDRESS**  
**CITY - ST - ZIP**

☐ **Delete**

**TITLE**  
**NAME**  
**STREET ADDRESS**  
**CITY - ST - ZIP**

☐ **Change** ☐ **Addition**

**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:**

*YUN BI LIU*

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**

**Date**

**Daytime Phone #**

CR2E034 (10/02)