

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P03812

1. Entity Name

CHIN-TU ENTERPRISES CO, INC

FILED

Jan 27, 2000 8:00 am  
Secretary of State

01-27-2000 90110 038 \*\*\*150.00

Principal Place of Business

Mailing Address

1551 FOXDEN ROAD  
APOPKA FL 32712-3003  
US

1551 FOXDEN ROAD  
APOPKA FL 32134-1049  
US

2. Principal Place of Business

3. Mailing Address

4802 HURDLE CT  
Suite, Apt. #, etc.  
ORLANDO

4802 HURDLE CT  
Suite, Apt. #, etc.

City & State

City & State

FL

ORLANDO FL

Zip

Country

32818-8707 ORANGE

Zip

Country

32818-8707 ORANGE

-6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

TETU, JOSEPH R.  
1551 FOXDEN ROAD  
APOPKA FL 32712

Name

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

4802 HURDLE CT

City

ORLANDO

FL

Zip Code

32818-8707

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, 2000 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	VST TETU, JOSEPH R. 1551 FOXDEN ROAD APOPKA FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TETU, JANINE R 1551 FOXDEN ROAD APOPKA FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4802 HURDLE CT ORLANDO FL 32818-8707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4802 HURDLE CT ORLANDO FL 32818-8707
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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:

Joseph R. Tetu / JOSEPH R. TETU 01/24/00 407-532-0152  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)