2001 UNIFORM BUSINESS REPORT (UBR)

Jul 25, 2001 8:00 am **Secretary of State** DOCUMENT # P27912 1. Entity Name 07-05-2001 90003 047 ***550.00 POLYCORE ENTERPRISES \U.S.A.\, INC. Principal Place of Business Mailing Address I U W 1323 NEWBURY ROAD 1323 NEWBURY BOAD SUITE 205 NEWBURY PARK CA 91320-3620 Suite 205-> ALEWBURY PARK CA-91320-3870 moved as of 2109/01 2. Principal Place of Business 3. Mailing Address 333 N. Lantana St. <u>333 *N*.</u> Lantana St. Sulte, Apt. #, etc. Se. 130 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Ste. 4. FEI Number Applied For 77-0077970 amarillo amanllo. Not Applicable \$8.75 Additional USA 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name THE PRENTICE-HALL CORPORATION SYSTEM, INC. Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301 City 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax fiting requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 (See criteria on back) Trust Fund Contribution. Added to Fees Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PTD TITLE ☐ Deleta Change Addition HAN, HOO TJHIANG NAME STREET ADDRESS 1323 NEWBURY ROAD., STE 205 STREET ADDRESS CITY-ST-ZIP NEWBURY PARK CA 91320-3686 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition SUMARGO, SAMMY NAME NAME STREET ADDRESS 9-D BRIGHT HILL DRIVE STREET ADORESS CITY-ST-ZIP SINGAPORE CITY-ST-ZIP ITE ☐ Delete TITLE NAME RUNDERKAMP, HANS ---STREET ADDRESS 400 ORCHARD RD: 22-06 STREET ADORESS. CITY-ST-ZIP **SINGAPORE** CITY-ST-2IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-2IP TITS F ☐ Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this indicated on this report or supplemental report is true of the corporation or the receiver or trustee empower changed, or on an attachment with an address with. does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information courage and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

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HOO TJHIANG HAN, PRESIDENT

SIGNATURE: