

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 14, 2001 8:00 am
Secretary of State

09-14-2001 90031 041 ***150.00

DOCUMENT # P93000002007

1. Entity Name
SUN BROS. USA, INC.

Principal Place of Business
14655 LONE EAGLE DR
ORLANDO FL 32837

Mailing Address
14655 LONE EAGLE DR
ORLANDO FL 32837

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3158109**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LIU, SHIOW-MEEI
14655 LONE EAGLE DR
ORLANDO FL 32837

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.

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 ☐ Delete
 NAME **P**
 STREET ADDRESS **LIU, BI-YU**
 CITY-ST-ZIP **14655 LONE EAGLE DR.**
ORLANDO FL 32837

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

TITLE ☐ Delete
 NAME **VS**
 STREET ADDRESS **LIU, SHIOW-MEEI**
 CITY-ST-ZIP **14655 LONE EAGLE DR.**
ORLANDO FL 32837

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

TITLE ☐ Delete
 NAME **T**
 STREET ADDRESS **LIU, WILLIAM**
 CITY-ST-ZIP **14655 LONE EAGLE DR**
ORLANDO FL 32837

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

9-10-01 (407)-240-7988

CR2E034 (5/01)

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT

1. Entity Name

Sun Bros USA, Inc.

Principal Place of Business

14655 Lone Eagle Dr.
Orlando, FL 32837

Mailing Address

14655 Lone Eagle Dr.
Orlando, FL 32837

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3158109

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Shiow-Meei Liu
14655 Lone Eagle Dr.
Orlando, FL 32837

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.

SIGNATURE

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

(NOTE: Registered Agent Signature required when releasing)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

10. Election Campaign Financing Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	President	☐ Delete
NAME	Bi-Yu Liu	
STREET ADDRESS	14655 Lone Eagle Dr.	
CITY-STATE-ZIP	Orlando, FL 32837	
TITLE	Vice President / Secretary	☐ Delete
NAME	Shiow-Meei Liu	
STREET ADDRESS	14655 Lone Eagle Dr.	
CITY-STATE-ZIP	Orlando, FL 32837	
TITLE	Director	☐ Delete
NAME	William Liu	
STREET ADDRESS	14655 Lone Eagle Dr.	
CITY-STATE-ZIP	Orlando, FL 32837	
TITLE	Director	☐ Delete
NAME	Pai Liu	
STREET ADDRESS	14655 Lone Eagle Dr.	
CITY-STATE-ZIP	Orlando, FL 32837	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE	Director	☒ Change ☐ Addition
NAME	William Liu	
STREET ADDRESS	6191 Loyte St.	
CITY-STATE-ZIP	Cypress, CA 90830	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/2001 626-330-9599

Date

Printed Name

CR20034 (11/00)

Attachment

Doc. # P93000002007 A0086109
Attempt second filing:

To whom may it concern

My name is Shiow-Meei Liu, the president and current registered agent of Sun Bros. USA Inc. Our company filed the 2001 Uniform Business Report on April 26, 2001, with a personal check for \$150.00 to be paid by a company director, William Liu. Apparently the document was lost and William check wasn't deposited. I was visiting family in Taiwan and did not receive the notice for the filing problem until recently. I did file and mailed the document certified from California.

Since we did file and attempted to pay before May 1st please help us to solve the problem. Allow us to do second filing again. I attach a copy, it was downloaded and filled out by William and ^{was} sent "Next Day Air Via the U.S. Postal Service. Thank you for your attention in this matter. Sincerely

SHIOW MEEI LIU
SUN BROS. USA Inc.
14655 Lone Eagle Dr.
Orlando FL 32837

Shiow Meei Liu