## 2001\_UNIFORM BUSINESS REPORT (UBR)

## Mar 26, 2001 8:00 am Secretary of State DOCUMENT # p93000052501 1. Entity Name 03-26-2001 90130 001 \*\*\*150.00 03-26-2001 90130 002 \*\*\*\*\*8.75 KINGSLEY INTERNATIONAL TRADING CO. Mailing Address Principal Place of Business 7105 NW 41st STREET 7105 NW 41st STREET MIAMI, FL 33166 MIAMI, FL 33166 66052 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number City & State Applied For 65-0428708 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Wei Chen Street Address (P.O. Box Number is Not Acceptable) ANDREW LEE 240 LAKEVIEW DRIVE 2001 SW 157th Ave. #105 33027 FT. LAUDERDALE, FL Miramar 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS Change Addition TITLE \_\_\_\_ Celete រារាទ President ANDREW LEE NAME NAME Wei Chen STREET ADDRESS 240 LAKEVIEW DRIVE, #105 STREET ADDRESS 001 SW CITY - ST - ZIP CITY - ST - ZIP LAUDERDALE, FL 33326 Addition TITLE Delete Change 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 - ZIP TITLE TITLE Delete Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP TITLE Delete TITLE Addition Change 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 - 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 ephpowered 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

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