2002 UNIFORM BUSINESS REPORT (UBR)

May 14, 2002 8:00 am & Secretary of State **DOCUMENT #** P93000072197 1. Entity Name 05-14-2002 90328 023 ***150.00 HOUSE OF YING, INC. Principal Place of Business Mailing Address 3026 E. COMMERCIAL BLVD. 3026 E. COMMERCIAL BLVD. FT. LAUDERDALE FL 33308 FT. LAUDERDALE FL 33308 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEI Number 65-0446299 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent س تني دوست ≈ 7. Name and Address of New Registered Agent Name CHANG, YUEH YING Street Address (P.O. Box Number is Not Acceptable) 3026 COMMERCIAL BLVD. FT. LAUDERDALE FL 33308 City Zip Code FL 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. 25 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (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 filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change ☐ Addition CHANG, YUEH YING NAME NAME STREET ADDRESS 3026 E. COMMERCIAL BLVD. STREET ADDRESS CITY-ST-ZIP FT. LAUDERDALE FL 33308 CITY-ST-ZIP 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-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAMÉ STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ► ☐ 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 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.

FILED