

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000081017

1. Entity Name

INTERCHEM, INC.

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90198 037 ***150.00

Principal Place of Business

13884 SW 64 STREET
MIAMI FL 33183
US

Mailing Address

13884 S.W. 64 STREET
MIAMI FL 33183-1183
US

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

65-0449057

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

LU, JINGFENG
13884 SW 64 STREET
MIAMI FL 33183

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

JINGFENG LU

Jingfeng Lu

PD.

02/26/00

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

V
YONGZHEN, QI
13884 SW 64 STREET
MIAMI FL 33183

☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

PD
LU, JINGFENG
13884 SW 64 STREET
MIAMI FL 33183

☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

S
HO, EMY
13884 SW 64 STREET
MIAMI FL 33183

☒ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE
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CITY-ST-ZIP

☐ Change ☐ Addition

Lijia LU, secretary
13884 S.W. 64 street Miami FL 33183

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:

JINGFENG LU

02/26/00

305-382-5311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)