

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2002 8:00 am
Secretary of State

03-14-2002 90051 006 ***150.00

DOCUMENT # P93000081017

1. Entity Name
INTERCHEM, INC.

Principal Place of Business

13884 SW 64 STREET
MIAMI FL 33183
US

Mailing Address

13884 S.W. 64 STREET
MIAMI FL 33183
US

2. Principal Place of Business

2311 SW 125th Avenue

Suite, Apt. #, etc.

3. Mailing Address

2311 SW 125th Avenue

Suite, Apt. #, etc.

City & State

Miramar Florida

City & State

Miramar Florida

4. FEI Number

65-0449057

Applied For

Not Applicable

Zip

33027

Country

USA

Zip

33027

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LU, JINGFENG

13884 SW 64 STREET
MIAMI FL 33183

7. Name and Address of New Registered Agent

Name

Lu, JINGFENG

Street Address (P.O. Box Number is Not Acceptable)

2311 SW 125th Avenue

City

Miramar

FL

Zip Code

33027

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

03/02/02

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, 2002 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

TITLE	V	<input type="checkbox"/> Delete
NAME	YONGZHEN, QI	
STREET ADDRESS	13884 SW 64 STREET	
CITY-ST-ZIP	MIAMI FL 33183	
TITLE	PD	<input type="checkbox"/> Delete
NAME	LU, JINGFENG	
STREET ADDRESS	13884 SW 64 STREET	
CITY-ST-ZIP	MIAMI FL 33183	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	LIJIA, LU	
STREET ADDRESS	13884 SW 64 STREET	
CITY-ST-ZIP	MIAMI FL 33183	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jenny Vasquez	
STREET ADDRESS	2274 SW 125 Ave	
CITY-ST-ZIP	Miramar FL 33027	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Yunjia Lu	
STREET ADDRESS	13884 SW 64th Street	
CITY-ST-ZIP	Miami, FL 33183	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 lines empowered.

SIGNATURE:

Jingfeng Lu
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/02/02

Date

(954) 436-1109
305-582-2344

Daytime Phone #

CR2E034 (9/01)