

**2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # **P94000016937**1. Entity Name  
**KERA TECHNOLOGY, INC.****FILED**  
**May 21, 2002 8:00 am**  
**Secretary of State**

05-21-2002 91167 032 \*\*\*150.00

Principal Place of Business

Mailing Address

2. Principal Place of Business

**N/A**

Suite, Apt. #, etc.

3. Mailing Address

**N/A**

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **59-323227**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**CHOW, CHING  
8843 LARWIN LANE  
ORLANDO FL 32817**

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 is required when registration)

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                        |   | 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   |   |
|---|---|---|---|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | <b>D<br/>CHOW, CHING<br/>8843 LARWIN LN<br/>ORLANDO FL 32817</b><br><input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-STATE-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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3. 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, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Ching Chow*

Attachment

P94000016937/6677A

From the desk of Ching Chow

8843 Larwin Lane, Orlando, FL 32817

MEMO

TO:

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, FL 32302-1500

FAX: (404) 250-9006

TEL: (404) 250-9700

FROM:

FAX: (407) 282-3743

TEL: (407) 382-2735

DATE: April 30, 2002

# of pages: 1

To Whom It May Concern:

Kera Technology (Doc # P94000016937, EIN: 59-3232227) did not receive a 2002 Uniform Business Report Form so I am sending a revised form from year 2001. (I have borrowed the envelope from a company that filed electronically.)

While the company is listed as "active", it is not conducting business and does not have a physical or company mailing address. Please send correspondence responding to this report to Ms. Chow's home address:

8843 Larwin Lane  
Orlando, FL 32817

Please do not use the home address for the company's official mailing address.

Best regards.