FILED

2001 UNIFORM BUSINESS REPORT (UBR).

SIGNATURE:

Apr 23, 2001 8:00 am DOCUMENT # **P94000023668** Secretary of State SUMMIT INTERNATIONAL, INC. 04-23-2001 90180 044 ***150.00 Principal Place of Business Mailing Address 5217 N.W. 23RD PLACE 5217 N.W. 23RD PLACE GAINESVILLE FL 32606 GAINESVILLE FL 32606 2. Principal Place of Business 3. Mailing Address Suite. Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State X Applied For 4. FEI Number 59-3230169 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent -HE, YUN-JU Street Address (P.O. Box Number is Not Acceptable) 5217 N.W. 23RD PLACE **GAINESVILLE FL 32606** City 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. 4/16/01 YUN-JU HE, Dresident SIGNATURE gnature, 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 Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 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 OFFICERS AND DIRECTORS 11. SVP CR2E034 (10/00 ☐ Change ■ Addition Delete TITLE TITLE NAME ZHANG, LI NAME STREET ADDRESS STREET ADDRESS 5217 NW 23 RD PL CITY-ST-7IP CITY-ST-ZIP **GAINESVILLE FL** ☐ Change ☐ Addition TITLE ☐ Delete T1TLF NAME YUE-PING, LU NAME STREET ADDRESS STREET ADDRESS 159 SIN MING RD. CITY-ST-ZIP CiTY-ST-ZIP SINGAPORE 57-5625 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME CHEN, XIAO-YI NAME STREET ADDRESS STREET ADDRESS 5217 NW 23RD PLACE CITY-ST-ZIP CITY-ST-ZIP **GAINESVILLE FL 32606** TITLE ☐ Delete ☐ Change ☐ Addition LIRAN, HE STREET ADDRESS 5217 NW 23RD PLACE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **GAINESVILLE FL 32606** TITLE $C \in \mathcal{O}$ ☐ Delete TITLE Change ☐ Addition Jin, Zu-Guang NAME NAME STREET ADDRESS STREET ADDRESS 5.217NW 23 rd place Gainesville FLIV CITY-ST-ZIP DCITY-ST-ZIP TITLE TITLE ☐ Change ☐ Addition HE, We: 5217 NW 23 rd place 5217 NW 23 rd place NAME NAME STREET ADDRESS STREET ADDRESS 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 CITY-ST-ZIP changed, or on an attachment with an address, with all other like empowered.

UN-JUHE, President