

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90068 018 ***150.00

DOCUMENT # P94000065773

1. Entity Name
HUANG HOLDINGS, INC.

Principal Place of Business 333 N LAKE PARKER AVE LAKELAND FL 33801 US	Mailing Address 925 SEA WATERS LANE VERO BCH FL 32963 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address P.O. Box 1550 Suite, Apt. #, etc.
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City & State GRANBY CO	4. FEI Number 59-3269219	Applied For <input type="checkbox"/> Not Applicable
Zip 80446-1550	Country USA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
COWAN, ROMAN ORTEGA
637 2ND LANE F
VERO BEACH FL 32962

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 _____ (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 PD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME HUANG, WILLIAM		NAME	
STREET ADDRESS 5623 PECK ROAD		STREET ADDRESS	
CITY-ST-ZIP ARCADIA CA		CITY-ST-ZIP	
TITLE VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME COWAN, ROMAN O		NAME	
STREET ADDRESS 637 2ND LANE F		STREET ADDRESS	
CITY-ST-ZIP VERO BEACH FL 32962		CITY-ST-ZIP	
TITLE VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME CHAN, CYNTHIA		NAME	
STREET ADDRESS 333 W WISTARIA		STREET ADDRESS	
CITY-ST-ZIP ARCADIA CA		CITY-ST-ZIP	
TITLE STD.	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME WHITE, ELIZABETH K		NAME	
STREET ADDRESS 3251 CR 60		STREET ADDRESS	
CITY-ST-ZIP GRANDBY CO 80446-1550		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: Elizabeth K White Sr DATE: 2/11/00 DAYTIME PHONE: 887-2468
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)