

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Aug 04, 2003 8:00 am
Secretary of State

08-04-2003 90147 047 ***150.00

DOCUMENT # P94000066698					
1. Entity Name ④ Chinese Garden, Inc.					
3427 NE 163 rd Street North Miami Beach, FL 33160			3427 NE 163 rd Street N. Miami Beach, FL 33160		
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 65-0518880	
				<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
7. Name and Address of Current 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 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) <input type="checkbox"/>		January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
11. OFFICERS AND DIRECTORS					
TITLE	D. Ma, Tony			TITLE	
NAME	3427 NE 163 rd Street			NAME	
STREET ADDRESS	N. Miami Beach, FL 33160			STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
TITLE				TITLE	
NAME				NAME	
STREET ADDRESS				STREET ADDRESS	
CITY - ST - ZIP				CITY - ST - ZIP	
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NAME				NAME	
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TITLE				TITLE	
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 on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Tony C. Ma</u>			Date: <u>7/30/03</u>		Daytime Phone #: <u>(305) 949-3318</u>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2E034B (12/01)

Chinese Garden, Inc.

3427 NE 163rd Street
N. Miami Beach, FL 33160

Phone: (305) 949-3318
Fax (305) 949-1183

80135636
D94 000064698

July 31, 2003

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

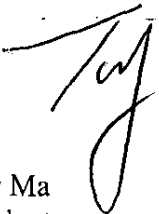
Dear State Department Officer,

We received the second notice to file our Uniform Business Report. In the earlier part of this year, our business mail box located in the supping center was frequently tempered with. At times, all our mails including tax forms and bank statements were stolen. We think that the first notice was lost under the same circumstances. We have filed our Uniform Business Reports on time in past five years. Under these circumstances, we request the department to abate the \$400.00 penalty. The signed report and the original \$150.00 filling fee is enclosed.

Thank you for considering our abatement request.

Sincerely,

Tony Ma
President

 C. Ma