2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

FILED DOCUMENT # **P95000071915** Mar 14, 2000 8:00 am **Secretary of State** LEE MART, INC. 03-14-2000 90053 025 ***150.00 Mailing Address Principal Place of Business 18541 E. NOTTINGHAM LANE 18541 E. NOTTINGHAM LANE ROWLAND HEIGHTS CA 91748 ROWLAND HEIGHTS CA 91748 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-3339458 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ---TSAY, YIN HUI Street Address (P.O. Box Number is Not Acceptable) 6828 CIRCLE CREEK DRIVE PINELLAS PARK FL 34665 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 DATE Signature, 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 \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME KAN LI, JUNG (STEWART) STREET ADDRESS STREET ADDRESS 18541 E. NOTTINGHAM LANE CITY-ST-ZIP CITY-ST-ZIP **ROWLAND HEIGHTS CA 91748** ☐ Addition Change Delete TITLE TITI F YIN HUI TSAY, (STEPHANY) NAME STREET ADDRESS STREET ADDRESS 18541 E. NOTTINGHAM LANE CITY-ST-ZIP CITY-ST-ZIP **ROWLAND HEIGHTS CA 91748** ☐ Change ☐ Addition TITI F Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS 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 will all other like empowered.

Jin Hui Tsay, 03/08/2000