

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000074429

1. Entity Name

MALAYSIA TRADING, INC.

FILED
Mar 08, 2000 8:00 am
Secretary of State

03-08-2000 90004 007 ***150.00

Principal Place of Business

1417 SE 43RD STREET
CAPE CORAL FL 33904-7343

Mailing Address

1417 SE 43RD STREET
CAPE CORAL FL 33904-7343

2. Principal Place of Business

1946 DANA DRIVE

Suite, Apt. #, etc.

FT. MYERS, FL

City & State

Zip
33907

Country

3. Mailing Address

1946 DANA DR

Suite, Apt. #, etc.

City & State

FT. MYERS FL

Zip

33907

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0617771

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHANG, KEN L
1417 SE 43RD STREET
CAPE CORAL FL 33904-7343

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

1946 DANA DR

City

FT. MYERS, FL

Zip Code

33907-2104

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) ☐

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
CHANG, KEN L
1417 SE 43RD STREET
CAPE CORAL FL 33904-7343 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition
1946 DANA DR
FT. MYERS, FL 33907-2104

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

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CITY - ST - ZIP
☐ Change ☐ Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)