

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

FILED

02 APR '15 AM 8:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P95000086182

1. Entity Name

JOHN WONG INCORPORATED.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5100 N 9TH AVE.

3. Mailing Address

3990 BAYOU BLVD.

Suite, Apt. #, etc.

#325

Suite, Apt. #, etc.

P

City & State

PENSACOLA, FL

City & State

PENSACOLA, FL

4. FEI Number

59-3377373

Applied For

Not Applicable

Zip

32504

Country

U.S.A

Zip

32503

Country

USA

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JOHN WONG.

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

3990 BAYOU BLVD.

City

PENSACOLA

FL

Zip Code

32503.

**DO NOT WRITE
IN THIS SPACE**

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

John King Wong

3/19/02

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) ☐

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. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D JOHN WONG
3990 BAYOU BLVD.
PENSACOLA, FL 32503

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
000005338630--6
-04/25/02--01006--017
****150.00 ****150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D KIM WONG
3990 BAYOU BLVD.
PENSACOLA, FL 32503.

TITLE
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STREET ADDRESS
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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:

John King Wong (JOHN WONG)

3/19/02

850-479-0888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

March 20, 2002

CENTER FOR DESIGN PLANNING
2300 E. MALLORY ST.
PENSACOLA, FL 32503

Subject: **CENTER FOR DESIGN PLANNING**

Reference Number: **835323**

Please be advised, we have received your annual report/uniform business report; however, the report has not been filed and a copy is being returned for the following correction(s):

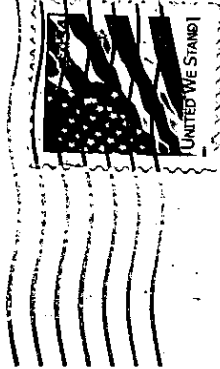
To be accepted by our bank, a check must be completed in its entirety. Both the numeric and written amounts must be completed.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/ns

ANNUAL REPORTS SECTION



Annual Reports Section
Division of Corporations
Florida Dept of State
PO Box 6327
Tallahassee, FL 32314

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