

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 22, 2002 8:00 am**  
**Secretary of State**

07-22-2002 90167 030 \*\*\*150.00

**DOCUMENT # P96000007410**

**1. Entity Name**  
**BEIJING PALACE, INC.**

**Principal Place of Business**  
~~15200 CARTER RD (JOG ROAD)~~  
**ATLANTIC II PLAZA**  
**DELRAY BEACH FL 33446**

**Mailing Address**  
**15200 JOG RD**  
**C-1**  
**DELRAY BEACH FL 33446**  
**US**



DO NOT WRITE IN THIS SPACE

**2. Principal Place of Business**  
**15200 JOG ROAD**

**3. Mailing Address**  
 Suite, Apt. #, etc.

**City & State** **City & State** **4. FEI Number** **65-0635251** **Applied For**  
**Zip** **Country** **Zip** **Country** **Not Applicable**

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent** **7. Name and Address of New Registered Agent**

**CHEUNG, TING C**  
**15200 CARTER RD.,**  
**ATLANTIC II PLAZA**  
**DELRAY BEACH FL 33446**

**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. I am familiar with, and accept the obligations of registered agent.**

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_  
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

**9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.** ☐ **FILE NOW!!! FEE IS \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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		
<b>TITLE</b>	<b>D</b>	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<b>NAME</b>	<b>CHEUNG, TING C</b>		<b>NAME</b>		
<b>STREET ADDRESS</b>	<b>9811 APT B 61 WAY S</b>		<b>STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>	<b>BOYNTON BEACH FL 33437</b>		<b>CITY-ST-ZIP</b>		
<b>TITLE</b>	<b>VP</b>	<input type="checkbox"/> Delete	<b>TITLE</b>	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
<b>NAME</b>	<b>LEE, PAK</b>		<b>NAME</b>	<b>Lee, Pak</b>	
<b>STREET ADDRESS</b>	<b>4862 PIMLICO CT</b>		<b>STREET ADDRESS</b>	<b>6309 Coolidge Court</b>	
<b>CITY-ST-ZIP</b>	<b>WEST PALM BEACH FL 33415</b>		<b>CITY-ST-ZIP</b>	<b>Boynton Beach, FL 33437</b>	
<b>TITLE</b>	<b>D</b>	<input type="checkbox"/> Delete	<b>TITLE</b>	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
<b>NAME</b>	<b>LI, ZHONG DE</b>		<b>NAME</b>	<b>Li, Zhong De</b>	
<b>STREET ADDRESS</b>	<b>4862 PIMLICO CT</b>		<b>STREET ADDRESS</b>	<b>24 La Casa</b>	
<b>CITY-ST-ZIP</b>	<b>WEST PALM BEACH FL 33415</b>		<b>CITY-ST-ZIP</b>	<b>Boynton Beach, FL 33437</b>	
<b>TITLE</b>		<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<b>NAME</b>			<b>NAME</b>		
<b>STREET ADDRESS</b>			<b>STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>			<b>CITY-ST-ZIP</b>		
<b>TITLE</b>		<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<b>NAME</b>			<b>NAME</b>		
<b>STREET ADDRESS</b>			<b>STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>			<b>CITY-ST-ZIP</b>		
<b>TITLE</b>		<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
<b>NAME</b>			<b>NAME</b>		
<b>STREET ADDRESS</b>			<b>STREET ADDRESS</b>		
<b>CITY-ST-ZIP</b>			<b>CITY-ST-ZIP</b>		

**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 REQUIRED** **561-637-1686**

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR** **Date** **Daytime Phone #**

CR2E034 (4/02)

Attachment  
Dr. # P96000007410  
60131069

Beijing Palace, Inc.  
15200 Jog Road, C-1  
Delray Beach, FL 33446

July 17, 2002

Department of Revenue  
Division of Corporations  
PO BOX 1500  
Tallahassee, FL 32302

Dear Sir or Madam:

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Enclosed please find the 2002 Uniform Business Report and a check of \$150.00 for the filing fee.

Please note that we did not receive your prior notices, due to the long remodeling of the business. We respectfully request waiver of any penalty.

Your consideration and time is greatly appreciated. Thank you.

Sincerely yours,



Beijing Palace, Inc.