2002 UNIFORM BUSINESS REPORT (UBR)

Jul 11, 2002 8:00 am Secrétary of State P96000021002 DOCUMENT # 1. Entity Name 07-11-2002 90251 045 ***150.00 KIM LONG, INC. Mailing Address Principal Place of Business Antroina 1319 ROGERO RD 1319 ROGERO RD JACKSONVILLE FL 32211 JACKSONVILLE FL 32211 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number 59-3368592 City & State City & State Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name NUSSBAUM, WILLIAM Street Address (P.O. Box Number is Not Acceptable) 1851 EXECUTIVE CENTER DR SUITE 102 Zip Code JACKSONVILLE FL 32207 City 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. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After September 13, 2002 Fee will be \$750.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition ☐ Change TITLE Delete VOTRAN, HOANG NAME 1319 ROGERO RD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Jax Fl CITY-ST-ZIP ☐ Change Addition Delete TITI F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP Change ☐ Addition ☐ Celete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE Delete _ TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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:

REOF SIGNING OFFICER OR DIRECTOR July 5, 2002

FILED

AHacknent 60/28705 Doc. # A6000021002

July 5, 2002.

From: Kim Long, Inc. 1319 Rogero Road Jacksonville, Fl. 32211.

To: Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, Fl. 32302-1500.

Dear Sir/Madam!

If you look back to the record of my incorporation, you can see I had always filed my Uniform Business Report before May I of each year. However, somehow this year, I did not receive any Uniform Business Report from the State until July 2, 2002. So, I called Division of Corporation and spoke to one of your officers on July 3, 2002 to discuss about the Uniform Business Report that I just received from the State. She advised me to write a letter and a check of 150 dollars to the Florida Department of State – Division of Corporation.

Please considering my Incorporation Filing status and call me at 904-744-4622 or my cell phone at 904-534-0515 if you have any question.

Once again, please accept my appreciation for your help.

Sincerely,

Hoang Votran

Incorporation President.