

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90026 004 ***150.00

DOCUMENT # P96000096965

1. Entity Name
CHINA MAX INVESTMENT, INC.

Principal Place of Business

3903 NORTHDAL BLVD
STE 150E
TAMPA FL 33624
US

Mailing Address

3903 NORTHDAL BLVD
STE 150E
TAMPA FL 33624
US

2. Principal Place of Business

3421 N. LAKEVIEW DR.

3. Mailing Address

3421 N. Lakeview Drive

Suite, Apt. #, etc.

SUITE 168

Suite, Apt. #, etc.

Suite 168

City & State

TAMPA, FL

City & State

Tampa, FL

Zip

33618-1363

Country

USA

Zip

33618-1363

Country

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HUANG, PANNY
3903 NORTHDAL BLVD
#150E
TAMPA FL 33624

Name

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

3421 N. LAKEVIEW DRIVE
SUITE 168

City

TAMPA

FL

Zip Code

33618-1363

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CHANG, KAN
3903 NORTHDAL BLVD, #150-E
TAMPA FL 33624 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
3421 N. LAKEVIEW DR SUITE 168
TAMPA, FL 33618-1363 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
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

Kan Chang

4/19/01

813-265-3955

Date

Daytime Phone #

CR2E034 (10/00)