

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 28, 2002 8:00 am
Secretary of State

07-28-2002 90199 012 ***550.00

DOCUMENT # P97000040690

1. Entity Name
FENG SHUI USA, INC.

Principal Place of Business

4201 OHIO AVE.
TAMPA FL 33616

Mailing Address

4201 OHIO AVE.
TAMPA FL 33616



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3507790

Applied For

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

JORGENSEN-HUNT, JANICE

4201 OHIO AVE.

TAMPA FL 33616

Name

Janice L. Hunt

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

4201 OHIO AVE.

City

Tampa

FL

Zip Code

33616

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

Janice L. Hunt

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/23/02

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 \$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

TITLE PVS ☐ Delete
NAME JORGENSEN-HUNT, JANICE
STREET ADDRESS 4201 OHIO AVE.
CITY-ST-ZIP TAMPA FL 33616

TITLE ☒ Change ☐ Addition
NAME Janice L. Hunt
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☐ Delete
NAME JORGENSEN-HUNT, JANICE
STREET ADDRESS 4201 OHIO AVE.
CITY-ST-ZIP TAMPA FL 33616

TITLE ☒ Change ☐ Addition
NAME JANICE L. Hunt
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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 Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Janice L. Hunt **REJANICE L. HUNT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/23/02 (813)835-0053

Date

Daytime Phone #

CR2E034 (4/02)