

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000076221

1. Entity Name

CRYSTAL PEARL, INC.

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90043 011 ***150.00

Principal Place of Business

Mailing Address

5712 LONG IRON DRIVE
 APARTMENT 228
 ORLANDO FL 32839-3279

5712 LONG IRON DRIVE
 APARTMENT 228
 ORLANDO FL 32839-3279

change to

2. Principal Place of Business

3. Mailing Address

147 SPOONHOUR DR

147 SPOONHOUR DR.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

CASSELBERRY FL

City & State

CASSELBERRY FL

4. FEI Number

59-3484512

☒ Applied For

☐ Not Applicable

Zip

32707

Country

U.S.A.

Zip

32707

Country

U.S.A.

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

CHONG, STEPHEN C. L.
 605 EAST ROBINSON STREET
 SUITE 510
 ORLANDO FL 32801

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.

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, 2000 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 ☐ Delete
 NAME D
 STREET ADDRESS CHEN, KUO-FU
 CITY-ST-ZIP 44 SEC. 2, YUAN-CHI RD. TIEN-CHUNG, CHUAN-HWA TAIWAN, R.O.C.

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

TITLE ☐ Delete
 NAME D
 STREET ADDRESS CHEN, LI-HUA
 CITY-ST-ZIP 44 SEC. 2, YUAN-CHI RD. TIEN-CHUNG, CHUAN-HWA TAIWAN, R.O.C.

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

TITLE ☐ Delete
 NAME D
 STREET ADDRESS CHEN, HUIMING CRYSL
 CITY-ST-ZIP 5712 LONG IRON DRIVE, APT. 228
 ORLANDO FL 32839

TITLE ☒ Change ☐ Addition
 NAME CHEN, HUIMING CRYSTAL
 STREET ADDRESS 147 SPOONHOUR DR
 CITY-ST-ZIP CASSELBERRY, FL 32707

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 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:

Signature: H. Chong
 SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/25/00 (407) 260-9030

CR2E034 (9/99)