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FILED
Jun 22, 2001 8:00 am
Secretary of State

04-26-2001 90100 021 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000077817

1. Entity Name

T & L TECHNOLOGY, INC.

Principal Place of Business

9108 CAMINO VILLA BLVD.
TAMPA FL 33635

Mailing Address

9108 CAMINO VILLA BLVD.
TAMPA FL 33635

2. Principal Place of Business

3. Mailing Address



DO NOT WRITE IN THIS SPACE

Suite, Apt. #, etc.

470 E. Douglas Rd

Suite, Apt. #, etc.

P.O. Box 261405

City & State

OLDSMAR, FL

City & State

Tampa FL

4. FEI Number 59-3468341

Applied For

Not Applicable

Zip

Country

34677

Zip

33685

Country

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

Name

CHUN Lam CHONG

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

470 E Douglas Rd

City

OLDSMAR

FL

Zip

34677

CHONG, TU-YONG

9108 CAMINO VILLA BLVD.
TAMPA FL 33635

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

CHUN Lam CHONG

(NOTE: Registered Agent signature required when reinstating)

5/10/01

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

TITLE	VP	☒ Delete
NAME	CHUNG, CHUN LAN	
STREET ADDRESS	9108 CAMINO VILLA BLVD.	
CITY-ST-ZIP	TAMPA FL 33635	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	☐ Change ☒ Addition
NAME	CHUN Lam CHONG	
STREET ADDRESS	470 E Douglas Rd	
CITY-ST-ZIP	OLDSMAR, FL 34677	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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)(f), 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 807, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an so, with all other like empowered.

SIGNATURE:

CHUN Lam CHONG

5-10-01

DATE

CR2034 (10/00)