

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000099212

1. Entity Name

U.S. PAN ASIA EDUCATION DEVELOPMENT INC.

FILED
Feb 29, 2000 8:00 am
Secretary of State

02-29-2000 90099 008 ***150.00

Principal Place of Business

5650 BAYSIDE DRIVE, #300
ORLANDO FL 32819

Mailing Address

5650 BAYSIDE DRIVE, #300
ORLANDO FL 32819-4045

2. Principal Place of Business

3. Mailing Address

7712 HIDDEN IVY CT

7712 HIDDEN IVY CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

ORLANDO

ORLANDO

City & State

City & State

FL

FL

Zip

32819

Country

Zip

32819

Country

4. FEI Number

59-3501852

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

KIANG, PAUL
5650 BAYSIDE DRIVE, #300
ORLANDO FL 32819

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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	PD			<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	KIANG, PAUL	5650 BAYSIDE DR 300	ORLANDO FL 32819							
	VTSD			<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	HSUEH, MARIA	7712 HIDDEN IVEY	ORLANDO FL 32819							
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change	<input type="checkbox"/> 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

1/29/00

407-370-2139

Date

Daytime Phone #

CR2E034 (9/99)