# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Feb 08, 2001 8:00 am**
**Secretary of State**
02-08-2001 90460 028 ***150.00

DOCUMENT # P98000064805

1. Entity Name,

MEE & MUI INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 4174 East 4 Ave. Hialeah, Fla. 33013 | Same |

A00021013

[redacted]

DO NOT WRITE IN THIS SPACE

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State: Hialeah Fla. |
| Zip / Country | Zip: 33013 / Country: U.S.A. |

4. FEI Number ☐ 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 |
|---|---|
| Su Chyn Sung<br>780 East 39 St.<br>Hialeah, Fla. 33013 | Name: Su Chyn Sung<br>Street Address (P.O. Box Number is Not Acceptable): 142 West 46 St. #337<br>City: Hialeah, Fla. FL Zip Code: 33012 |

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: X Su Chyn Sung — DATE: 1/21/01
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!! ... NOT MAY 1, 2001 ... Check Payable ...

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/D<br>Su Chyn Sung<br>780 E. 39 St. Hia. Fla. 33013 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | P/D Su Chyn Sung<br>142 West 46 St. #337<br>Hia. Fla. 33012 | ☑ Change ☐ Additic |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | V.P.<br>Lau Kam Cheng<br>780 E. 39 St<br>Hia. Fla. 33013 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | V.P. ~~Lau Kam Cheng~~<br>~~780 E. 39 St~~<br>~~Hia. Fla 33013~~ | ☐ Change ☐ Additic |
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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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Su Chyn Sung — 1/21/01 — (305) 362-9139
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #