## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Feb 06, 2001 8:00 am Secretary of State DOCUMENT # P98000099682 SANG HO ENTERPRISES, INC. 02-06-2001 90040 031 \*\*\*150.00 Principal Place of Business Mailing Address 3600 S. STATE ROAD 7 3600 S. STATE ROAD 7 SUITE 230 SUITE 230 MIRAMAR FL 33023 MIRAMAR FL 33023 2. Principal Place of Business 3. Mailing Address Suite Apt #, etc. --Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For-65-0877734 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SANG HO LEE, SANG Street Address (P.O. Box Number is Not Acceptable) 3600 S. STATE ROAD 7 SUITE 230 MIRAMAR FL 33023 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. X / - 26 - 0/ NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE.IS-\$150.00 9. This corporation is eligible to satisfy its Intangible --10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD TITLE ☐ Delete TITLE LEE, NAME HO LEE, SANG NAME STREET ADDRESS 3600 S. STATE ROAD 7 SUITE 230 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIRAMAR FL 33023 TITLE ☐ Delete ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F ☐ Change ☐ Addition ☐ \_\_\_\_ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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.

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR