

2000 UNIFORM BUSINESS REPORT (UBR)

091800

FILED

00 SEP 20 PM 2:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 991000019395

1. Entity Name

KUNG FU U.S.A. Inc.

Principal Place of Business

Mailing Address

525 10th STREET # 507

LAKE PARK, FL. 33403

2. Principal Place of Business

525 10th STREET

Suite, Apt. #, etc.

SUITE # 507

City & State

LAKE PARK, FL.

Zip

33403

Country

U.S.A.

3. Mailing Address

525 10th STREET

Suite, Apt. #, etc.

507

City & State

LAKE PARK, FL.

Zip

33403

Country U.S.A.

PALM BEACH

Amended

DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0900679 182312

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

7. Name and Address of New Registered Agent

Name

ARTHUR O'BRIEN

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

517 WEST JASMINE DRIVE

City

LAKE PARK

FL

Zip Code

33403

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

Arthur O'Brien

ARTHUR O'BRIEN

P

Sept. 13, 2000

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

TITLE *P/VA*

NAME

STREET ADDRESS

CITY-ST-ZIP

THANH VAN
109 BANYAN CIRCLE
JUPITER, FL. 33458

☒ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

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STREET ADDRESS

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TITLE

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STREET ADDRESS

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Delete

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE *P*

NAME

STREET ADDRESS

CITY-ST-ZIP

ARTHUR O'BRIEN
517 WEST JASMINE DRIVE
LAKE PARK, FL. 33403

☒ Change

☐ Addition

TITLE *T/S*

NAME

STREET ADDRESS

CITY-ST-ZIP

TOM SUMBERA
8584 CRATER TERRACE
LAKE PARK, FL. 33403

☒ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

600003408900

09/29/00 01013 010

*****61.25 *****61.25

☐ Change

☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change

☐ 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:

Arthur O'Brien

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sept. 13, 2000

Date

(561) 863-3085

Daytime Phone #

CR2E034 (9/99)