## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED DOCUMENT # P99000034791 May 19, 2000 8:00 am 1. Entity Name Secretary of State LE-JANE, INC. 05-19-2000 90086 018 \*\*\*150.00 Principal Place of Business Mailing Address 6147 NW 40TH ST. 6147 NW 40TH ST. CORAL SPRINGS FL 33067-3224 CORAL SPRINGS FL 33067 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number Not Applicable \$8.75 Additional Zip Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SANG LO, KIN Street Address (P.O. Box Number is Not Acceptable) 6147 NW 40TH ST. CORAL SPRINGS FL 33067 Zip Code FL 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 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, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ■ Addition TITLE ☐ Delete WONG, HIN CHAK NAME STREET ADDRESS STREET ADDRESS 6147 NW 40TH ST. CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33067 ☐ Delete ☐ Change Addition TITLE NAME LEUNG, OY SUEN NAME STREET ADDRESS STREET ADDRESS 6147 NW 40TH ST. CITY-ST-ZIP CITY-ST-ZIF **CORAL SPRINGS FL 33067** ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME IP, WAI CHAU STREET ADDRESS STREET ADDRESS 6147 NW 40TH ST. CITY-ST-ZIP CITY-ST-ZIP **CORAL SPRINGS FL 33067** ☐ Change Addition ☐ Delete TITLE TAI. CHIH HUI NAME STREET ADDRESS STREET ADDRESS 6147 NW 40TH ST. CITY-ST-ZIP CITY-ST-ZIP CORAL SPRINGS FL 33067 ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS 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)(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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR