

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jun 25, 2002 8:00 am**  
**Secretary of State**

06-25-2002 90453 004 \*\*\*150.00

DOCUMENT # *P99000058014*

1. Entity Name

*CHI HWA, INC.*

**DO NOT WRITE IN THIS SPACE**

**B0125797**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

*5250 TOWN CENTER STE 143*

Suite, Apt. #, etc.

*5250 TOWN CENTER STE 143*

City & State

*BOCA RATON*

City & State

*BOCA RATON*

4. FEI Number

*65-0933613*

Applied For

Not Applicable

Zip

*FL 33486*

Country

Zip

*FL 33486*

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

*TAI, CHI HWA H*

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

*5250 TOWN CENTER CIRCLE STE 143*

City

*BOCA RATON*

**FL**

Zip Code

*33486*

**DO NOT WRITE  
IN THIS SPACE**

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]*

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) ☐

**January 1 - May 1 Fee is \$150.00**

**After May 1, Fee is \$550.00**

**Amended UBR is \$61.25**

**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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
*D  
TAI, CHI HWA H  
5250 TOWN CENTER CIRCLE STE 143  
BOCA RATON FL 33486*

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
*D  
TAI, EVELYN M  
5250 TOWN CENTER CIRCLE STE 143  
BOCA RATON FL 33486*

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*06/18/02*

CR2E034B (12/01)

**CHI HWA, Inc.**  
5250 Town Center Circle Suite 143  
Boca Raton , FL 33486-1067507  
Telephone: (561) 368-8806

Attachment  
Document #  
P99000058014  
60125797

JUN 18, 2002

Florida Department Of State  
Uniform Business Report  
Division of Corporations  
Tallahassee, FL 32302-1500


Re: CHI HWA, INC  
**Document Number:P99000058014**

Dear Department of State,

We just received Uniform Business Report Form on Jun 10, 2002. This letter includes the check \$150.00 for the fee and the cover sheet which your officer sent with the UBR to our company. Since we didn't receive the UBR form on time, we respectfully request abatement of any penalty.

If you have any questions or need any additional information, Please contact me at (561) 241-5524.

Sincerely,



EVELYN TAI  
DIRECTOR

Attachment  
Document #  
P99000058014  
60125797

even tai  
5250 town center  
boca raton, fl 33486

Request taken by: rbrown  
06-04-2002

The forms you recently requested from this office are:

- (1) 201. COR Profit A/R

Should you have any questions or need any further information,  
please contact us at the address below:

Division of Corporations - P.O. BOX 6327 - Tallahassee FL 32314