

# FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

## DOCUMENT #

1. Entity Name **FAIRLAND INVESTMENTS, INC.**  
 REF. NO. P99000065252

02 AUG 26 AM 11:12

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

B0134335

## 2. Principal Place of Business

509 FAIRLAND AVE.

Suite, Apt. #, etc. **APT. 1**

## 3. Mailing Address

P.O. BOX 2546

Suite, Apt. #, etc.

## City &amp; State

PANAMA CITY, FL.

Zip **32405**Country **BAY**

## City &amp; State

PANAMA CITY, FL.

Zip **32402**Country **BAY**

## 4. FEI Number

59-3601973

Applied For

Not Applicable

## 5. Certificate of Status Desired

☐

**\$8.75** Additional  
Fee Required

## 7. Name and Address of Current Registered Agent

Name

PING QI MI

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

1509 FAIRLAND AVE. APT. 1

City PANAMA CITY, FL.

FL

Zip Code

32405

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

Ping Qi Mi Manager

08.18.02

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	PING QI MI MANAGER 1509 FAIRLAND AVE. APT. 1 PANAMA CITY, FL 32405	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GUO ZHEN ZHU MANAGER 1509 FAIRLAND AVE. APT. 1 PANAMA CITY, FL 32405	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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CR2E034B (12/01)

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: Ping Qi Mi  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

08.11.02. 850 769 0095.

Date

Daytime Phone #

Attknut  
Dear Sir or Madam

P99000065252

How are you.

Thanks for your service.

I didn't get the UBR ~~on~~ on

~~time because address was changed.~~

And sorry, send the report  
later.

Thank you again.

Sincerely

Hing Qi mi

PING QI MI.