

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000084065

1. Entity Name

H&M ENTERPRISES OF CENTRAL FLORIDA, INC.

FILED

May 02, 2001 8:00 am
Secretary of State

05-02-2001 90217 030 ***150.00

Principal Place of Business

1608 COLUMBIA ARMS CIR., #128
KISSIMMEE FL 34741

Mailing Address

129 W CHURCH ST
ORLANDO FL 32801

2. Principal Place of Business

3992 SHADOWIND WAY

Suite, Apt. #, etc.

GOTHA FL

City & State

34734

Zip

Country

USA

3. Mailing Address

3992 SHADOWIND WAY

Suite, Apt. #, etc.

GOTHA FL

City & State

34734

Zip

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3598074

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MONDELL, RICHARD
1608 COLUMBIA ARMS CIR., #128
KISSIMMEE FL 34741

7. Name and Address of New Registered Agent

Name

RICHARD MONDELL

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

3992 SHADOWIND WAY

City

GOTHA

FL

Zip Code

34734

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

4-25-01

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, 2001 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 PD ☐ Delete
NAME HUANG, HSU-YIAO
STREET ADDRESS 124 PINERIDGE LANE
CITY-ST-ZIP GOLDSBORO NC 27534

TITLE SD ☐ Delete
NAME HUANG, SIU-ER
STREET ADDRESS 124 PINERIDGE LANE
CITY-ST-ZIP GOLDSBORO NC 27534

TITLE VD ☐ Delete
NAME MONDELL, RICHARD
STREET ADDRESS 1608 COLUMBIA ARMS CIR., #128
CITY-ST-ZIP KISSIMMEE FL 34741

TITLE TD ☐ Delete
NAME MONDELL, SAN-CHI LYNN
STREET ADDRESS 1608 COLUMBIA ARMS CIR., #128
CITY-ST-ZIP KISSIMMEE FL 34741

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE TREASURER ☒ Change ☐ Addition
NAME HUANG, HSU-YIAO
STREET ADDRESS 2348 BAESIL VIEW DR
CITY-ST-ZIP ORLANDO FL 32835

TITLE SECRETARY ☒ Change ☐ Addition
NAME HUANG, SIU-ER
STREET ADDRESS 2348 BAESIL VIEW DR
CITY-ST-ZIP ORLANDO FL 32835

TITLE PRESIDENT ☒ Change ☐ Addition
NAME MONDELL, RICHARD
STREET ADDRESS 3992 SHADOWIND WAY
CITY-ST-ZIP GOTHA FL 34734

TITLE VICE PRESIDENT ☒ Change ☐ Addition
NAME MONDELL, SAN-CHI LYNN
STREET ADDRESS 3992 SHADOWIND WAY
CITY-ST-ZIP GOTHA FL 34734

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD MONDELL

Date

4-25-01

Daytime Phone #

467 810 3697

CR2E034 (10/00)