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2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000091108

1. Entity Name

C & L INTERNATIONAL, INC.

FILED
SECRETARY OF STATE
CORPORATIONS

00 DEC 11 PM 5:42



DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
3286 S. SEMORAN BOULEVARD, #21 ORLANDO FL 32822	3286 S. SEMORAN BOULEVARD, #21 ORLANDO FL 32822-2733

2. Principal Place of Business	3. Mailing Address
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Suite, Apt. #, etc	Suite, Apt. #, etc
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City & State	City & State
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Zip	Country	Zip	Country
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4. FEI Number	<input checked="" type="checkbox"/> Applied for <input type="checkbox"/> Not Applicable
36-1950041	

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LU, XIAOPING
3286 S. SEMORAN BOULEVARD, #21
ORLANDO FL 32822

Name

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

City

FL

Zip Code

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 reconstituting)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	Xiaoping Lu	<input type="checkbox"/> Delete
NAME	3286 S. Semoran Blvd., #21	
STREET ADDRESS	Orlando, FL 32822	
CITY-ST-ZIP		

TITLE	Title President	<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
NAME		
STREET ADDRESS		
CITY-ST-ZIP	03/02/00 90112 037	150.00

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
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STREET ADDRESS		
CITY-ST-ZIP		

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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Add
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 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

2/22/00

Date

To Whom It May Concern:

I filed the Uniform Business Report on February 22, 2000 for my corporation C&L International Inc. I recently got a notice from the department of state that my corporation has been administratively dissolved. But I checked that the filing fee was withdrawn already.

When I called the reinstate department at 850-487-6059 and talked to a representative named Leslie, she informed me that I was sent a notice to clarify the title of the officers in the corporation, and when they got no reply, they assumed I ignored it. But I told her that I never got any such notice and since I was the sole owner of the corporation, I did not have a title. She told me I could just write a letter stating that I did not receive any notice for clarification, and mail it along with the annual report, and the corporation should be reinstated.

Enclosed is the report that I filed in February, with the title of the corporation officer added. Thank you for your help.

Sincerely



XiaoPing Lu
President