

2000 UNIFORM BUSINESS REPORT (UBR)

3/2

FILED
May 02, 2000 8:00 am
Secretary of State

03-22-2000 90027 007 ***150.00

DOCUMENT # S07646

1. Entity Name

SUN-NA OF BROWARD COUNTY, INC.

Principal Place of Business

5371 N STATE RD 7
TAMARAC FL 33319
US

Mailing Address

5371 N STATE RD 7
TAMARAC FL 33319-2918
US

2. Principal Place of Business

5371 N State Rd 7
Suite, Apt. #, etc.
Tamarac,
City & State

3. Mailing Address

5371 N. State Rd 7
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

FLA.

City & State

Tamarac, FLA.

4. FEI Number

65-0244328

Applied For

Not Applicable

Zip

33319

Country

U.S.A.

Zip

33319

Country

U.S.

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WONG, HOY SUN
2920 NE E 55TH PL
FT LAUDERDALE FL 33308

7. Name and Address of New Registered Agent

Name: Wong Hoy Sun
Street Address (P.O. Box Number is Not Acceptable):
2920, N. E. 55th Place
Ft. Lauderdale, FL 33308
City: FL Zip Code: 33308

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 use 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) ☐

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

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WONG, HOY SUN	
STREET ADDRESS	4739 NE 17TH AVE	
CITY-ST-ZIP	FT LAUDERDALE FL	
TITLE		<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
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Hoy Sun Wong	
STREET ADDRESS	2920, N. E. 55th Place	
CITY-ST-ZIP	Ft. Lauderdale, FL 33308	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

3/15/2000

Date

454-485-6688

Daytime Phone #

CR2034 (9/99)