

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90247 047 ***150.00

DOCUMENT # *S17053*

1. Entity Name

A.E.G. TRADING COMPANY, INC.

Principal Place of Business

Mailing Address

*39800 SW 224 Ave.
 HOMESTEAD, FL 33034*

2. Principal Place of Business

3. Mailing Address

18999 BISCAYNE BLVD. #205

Suite, Apt. #, etc.

Suite, Apt. #, etc.

ADVENTURA, FL

City & State

City & State

4. FEI Number

65-0267071

Applied For

Not Applicable

Zip

Country

33180

Country

MIAMI BASE

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

*LEUNG JOSEPH Y, CPA
 18999 BISCAYNE BLVD. #205
 ADVENTURA, FL 33180*

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 reinstating)

DATE

9. This corporation is eligible to satisfy its intangible

FILE NOW!!! FEE IS \$150.00

AFTER MAY 1, 2001 Fee will be \$350.00

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 ☐ Delete
 NAME *PD CHIEF CHON, TUN*
 STREET ADDRESS *39800 SW 224 Ave.*
 CITY-ST-ZIP *HOMESTEAD, FL 33034*

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

TITLE ☐ Delete
 NAME *VD LAI LEE VONG*
 STREET ADDRESS *39800 SW 224 Ave*
 CITY-ST-ZIP *HOMESTEAD, FL 33034*

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 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]*

LAI YEE VONG (VICE PRESIDENT)

4/25/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)