

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S60617

1. Entity Name

GRAND ORIENTAL EXPRESS INC.

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90016 005 ***150.00

Principal Place of Business

Mailing Address

10019 SW 72 ST
MIAMI FL 33173

10019 SW 72 ST
MIAMI FL 33173-4623

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0291933

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SIT, KEVIN HUNG
1871 N.E. 172 ST
NORTH MIAMI BEACH FL 33162

Name SIT, KEVIN HUNG

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

10019 SW 72 ST

City MIAMI

FL

Zip Code 33173

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

Kevin Sit Kevin Sit President

3-25-2000

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 PTD
NAME SIT, KEVIN HUNG
STREET ADDRESS 1871 NE 172 ST
CITY-ST-ZIP N MIAMI BCH FL 33162 ☐ Delete

TITLE PTD
NAME SIT, KEVIN HUNG
STREET ADDRESS 13781 SW 66 ST, APT B-124
CITY-ST-ZIP MIAMI, FL 33183 ☒ Change ☐ Addition

TITLE SD
NAME YU, RUI YI
STREET ADDRESS 1871 NE 172 ST
CITY-ST-ZIP N MIAMI BCH FL 33162 ☐ Delete

TITLE SD
NAME YU, RUI YI
STREET ADDRESS 13781 SW 66 ST, APT B-124
CITY-ST-ZIP MIAMI, FL 33183 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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: *Kevin Sit*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Kevin Sit President

3/25/2000

Date

305-271-7112

Daytime Phone #

CR2E034 (9/99)