

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Feb 07, 2001 8:00 am  
Secretary of State

02-07-2001 90163 032 \*\*\*150.00

DOCUMENT # V45267

1. Entity Name  
MANDARIN DRAGON, INC.

Principal Place of Business  
11362-8 SAN JOSE BLVD  
JACKSONVILLE FL 32223

Mailing Address  
11362-8 SAN JOSE BLVD  
JACKSONVILLE FL 32223



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
11362 San Jose Blvd  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

City & State  
Jacksonville FL  
Zip  
32257  
Country

City & State  
Zip  
Country

4. FEI Number 59-3132080  
Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

ZHAO, JIATONG  
11362-8 SAN JOSE BLVD  
JACKSONVILLE FL 32223

## 7. Name and Address of New Registered Agent

Name Ivan Chow  
Street Address (P.O. Box Number is Not Acceptable)  
11362-8 San Jose Blvd  
City Jacksonville Fla. FL Zip Code 32257

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 *Ivan Chow*

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 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	P	CHOW, IVAN	<input type="checkbox"/> Delete
NAME		3128 MERLIN DR	
STREET ADDRESS		JACKSONVILLE FL	
CITY-ST-ZIP			
TITLE	VP	CHOW, ALEXANDER	<input type="checkbox"/> Delete
NAME		11208 CHESTER LAKE RD W.	
STREET ADDRESS		JACKSONVILLE FL 32256	
CITY-ST-ZIP			
TITLE	VP	CHOW, CATHERINE	<input type="checkbox"/> Delete
NAME		3125 MERLIN DR. N.	
STREET ADDRESS		JACKSONVILLE FL 32257	
CITY-ST-ZIP			
TITLE	VPS	CHOW, ELLEN	<input type="checkbox"/> Delete
NAME		3128 MERLIN DR	
STREET ADDRESS		JACKSONVILLE FL 32257	
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			
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			
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: *Ivan Chow* Ivan Chow

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Feb 1 01; 904-260-4681

CR2E034 (10/00)

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