



State of Washington
Business Licensing Service
PO Box 9034
Olympia WA 98507-9034
1-800-451-7985
bls.dor.wa.gov

Change In Governing People, Percentage Owned and/or Stock/Unit Ownership

(this does not replace your annual report)

UBI number
Liquor/Lottery license number
For validation only

03N-400-925-0003

* A different form is required to make changes to officers, members, managers or your Resident Agent with the Office of the Secretary of State. Please contact them at corps@sos.wa.gov or 360-725-0377.

- Liquor..... \$75.00 Change in more than 10% of stock, election of new officers or changes in members or managers.
- Marijuana..... \$75.00
- All other Licenses..... Required for all governing people and/or stock changes regardless of the amount of percentage of ownership.

Make check payable to the Department of Revenue

Total amount due (Add Row 1 and 2)

Amount Due	
\$	
\$	
\$	NO FEE
\$	

Ownership type ☒ Corporation ☐ LLC ☐ LP/LLP/LLLP ☐ Non Profit Corporation

► Applied Biological Materials USA Inc. 604206483 61-1903204
Name UBI Number FEIN
477 Horton Road Bellingham WA 98226 (604) 247-2416
Company mailing address (Street or route) City State Zip code Company telephone number
Lisa Young (604) 828-4995 lisa.young@abmgood.com
Contact name (Last, First, Middle) Contact telephone number Contact email address

Stock ownership (if applicable)

Total stock authorized: 1000000 Number of shares issued: 1000000 Par value per share:

At the completion of this change, the governing persons and/or stockholders will be:
Title examples: owner, partner, president, vice president, secretary, treasurer, member, manager, director

* ► Li, Peixiang Director 512951252 1963-11-29
Name (Last, First, Middle) Title Social security number Date of birth
Unit 1-3671 Viking Way Richmond BC V6V 2J5 (604) 639-7971
Home/business address (Street or route) City State Zip code Telephone number
01-02-2018 1000000 100% 01-02-2018
Date became owner/officer Number of shares owned Percent owned Date(s) issued or enter "pending" if not yet issued
Zhang, Wenying 512949637 1967-12-22
Name of spouse (Last, First, Middle) Spouse social security number Spouse date of birth

* Is this person related to other officers who own 10 percent or more?
(i.e. parent, stepparent, grandparent, spouse, children, brother, sister, stepchildren, adopted children or grandchildren) ☐ Yes ☒ No

► Name (Last, First, Middle) Title Social security number Date of birth
Home/business address (Street or route) City State ZIP code Telephone number
Date became owner/officer Number of shares owned Percent owned Date(s) issued or enter "pending" if not yet issued
Name of spouse (Last, First, Middle) Spouse social security number Spouse date of birth
Is this person related to other officers who own 10 percent or more?
(i.e. parent, stepparent, grandparent, spouse, children, brother, sister, stepchildren, adopted children or grandchildren) ☐ Yes ☐ No

Please continue on to the next page.

Name (Last, First, Middle) _____ Title _____ Social security number _____ Date of birth _____
 Home/business address (Street or route) _____ City _____ State _____ Zip code _____ Telephone number _____
 Date became owner/officer _____ Number of shares owned _____ Percent owned _____ Date(s) issued or enter "pending" if not yet issued _____
 Name of spouse (Last, First, Middle) _____ Spouse social security number _____ Spouse date of birth _____
 Is this person related to other officers who own 10 percent or more?
 (i.e. parent, stepparent, grandparent, spouse, children, brother, sister, stepchildren, adopted children or grandchildren) ☐ Yes ☐ No

Name (Last, First, Middle) _____ Title _____ Social security number _____ Date of birth _____
 Home/business address (Street or route) _____ City _____ State _____ Zip code _____ Telephone number _____
 Date became owner/officer _____ Number of shares owned _____ Percent owned _____ Date(s) issued or enter "pending" if not yet issued _____
 Name of spouse (Last, First, Middle) _____ Spouse social security number _____ Spouse date of birth _____
 Is this person related to other officers who own 10 percent or more?
 (i.e. parent, stepparent, grandparent, spouse, children, brother, sister, stepchildren, adopted children or grandchildren) ☐ Yes ☐ No

If necessary, attach additional sheets using the same format as shown above.

Removal of governing people

Name of governing person or stockholder	Social security number	Date of birth	Title	Removal Date

Additional forms or documents may be required by the individual agency.

Liquor and Cannabis Board (360) 664-1600 • Lottery (360) 753-2155

Certification

Under penalty of perjury, I hereby certify there have been no changes in officers or stockholders that have not been reported, and that each officer and stockholder is the real party in interest with respect to his/her position and is not acting directly or indirectly as agent, employee or representative of any other person not reported. I certify on behalf of the corporation that it is understood a misrepresentation of fact is cause for rejection of this application or revocation of any license issued. For Liquor and Marijuana changes a governing person signature is required.

Print Name EARVEST LEUNG Title _____
 Signature [Signature] Date 29 JAN 2023 Phone # 360-745-0066