## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

J	MENT # J57853 CHUNG WORLD MARTIAL AR	<b>\</b> /						
Principal Plac	e of Business	Mailing Address				4 CONTINUE REAL MENT ROUNT THIRD MESON FEIL GLOBER MEDIT OF	<b>0</b> 11 <b>011</b> 111 <b>0</b>	
% JAE SOON LEE 6301 WEST ATLANTIC BLVD MARGATE FL 33063		% JAE SOON LEE 6301 WEST ATLANTIC BLVD MARGATE FL 33063			DO NOT WRITE IN THIS SPA	CE		
1						3. Date Incorporated or Qualified 02/17/1987		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	A	oplied For
21		26				59-2764262		ot Applicable
Suite, Apt.	#, <del>0</del> (C:	Suile, Apt. #, etc.	<b>=</b>			5. Certificate of Status Desired		Additional equired
City & State	9	City & State	<u> </u>			6. Election Campaign Financing	<del></del>	May Be
23		28	· · · · · · · · · · · · · · · · · · ·			Trust Fund Contribution		to Fees
Zip	——————————————————————————————————————		}	Country		8. This corporation owes or has paid the current		
24	25 29 30 30 9. Name and Address of Current Registered Agent		[30]			Personal Property Tax due June 30. XX Y  10. Name and Address of New Registered Age	<u> </u>	] No
	EE, JAE SOON		81	Πī	Name			
6	301 WEST ATLANTIC BLVD		82	2 :	Street Addre	ess (P.O. Box Number is Not Acceptable)		
MARGATE FL 33063			83	<u>,  </u>				·····
			84	1 (	City	FL <sup> 8</sup>	5 Zip	Code
11. Pursuant	to the provisions of Sections 607.0502 a	and 607.1508, Florida <b>St</b> atu Liflorida, Such change was	ites, the above	/O-F	named corporation	oration submits this statement for the purpose of che on's board of directors. I hereby accept the appoint	anging i	ts registered
agent. I a	m familiar with, and accept the obligati	ons of Section 607.0505, F	lorida Statute	is.	ic corporation	one board of directors. Thoroby accept the appoint	man as	- Togrator Ca
SIGNATURE	Signature, typed or printed name of registered agent.	and tile (applicable (NO	If : Registered Aç	gent :	signature require	ed when reinstating) DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DI		
TITLE	DP DELETE		1.1 TITLE			Ш	Change	
NAME STREET ADDRESS	LEE, JAE SOON 6301 WEST ATLANTIC BLVD		1.2 NAME 1.3 STREE		IDBESS			
CITY-ST-ZIP	MARGATE FL 33063		14 CITY-		- 1			
TITLE		DELETE	2 1 11TLF				Change	Addition
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE					
CITY-ST-ZIP TITLE		DELETE	2. 4 CHY-	2. 4 CITY-ST-ZIP 3.1 TITLE			Change	Addition
NAME			3.2 NAME		1		-	
STREET ADDRESS			3.3 STREE	T AD	ORESS			
CITY-ST-ZIP TITLE		DELETE	3.4. CITY- 4.1 TITLE	ST-	ZIP		Change	Addition
NAME		[_] 1/22270	4.1 MLE 4.2 NAME				Onange	L. Aconion
STREET ADDRESS			4.3 STREE		IDRESS			
CITY-ST-ZIP			4.4 CiTY-:					
TITUE		DELETE	5.1 TITLE		[ -		Change	Addition
NAME PROFEST ADDRESS			5.2 NAME		NDDECC			
STREET ADDRESS CITY-ST-ZIP			5.3 STREE		J			
TITLE		DELETE	5.4 CITY - : 6.1 TITLE	ع-اد			Change	Addition
NAME		-	6.2 NAME				•	
STREET ADDRESS			6.3 STREE	T AD	ORESS			

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE.

4-25-98 (305)650-56

**FILED** 

May 06 1998 8:00am

Secretary of State