

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 12, 2001 8:00 am**  
**Secretary of State**

0082113

**DOCUMENT # N93000005175**

1. Entity Name

**THE KOREAN COMMUNITY CONCERN, INC.**

03-12-2001 90438 050 \*\*\*\*61.25

Principal Place of Business

901 E PALLMETTO PK RD  
 BOCA RATON FL 33486  
 US

Mailing Address

8582 VIA GIARDINO  
 BOCA RATON FL 33433  
 US

2. Principal Place of Business

**7203 W. Oakland Pk Blvd.**  
 Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

**Lauderhill, FL**

City & State

4. FEI Number

**65-0452063**

Applied For

Not Applicable

Zip

**33313**

Country

**USA**

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**MARK, FRIED E**  
**1110 BRICKELL AVE**  
**7TH FLOOR**  
**MIAMI FL 33131**

7. Name and Address of New Registered Agent

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

**FILE NOW:**  
**FEE IS \$61.25**

9. Election Campaign Financing  
 Trust Fund Contribution. ☐

**\$5.00** May Be  
 Added to Fees

**Make Check Payable to**  
**Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**DPT**  
**CHO, JOHN D**  
**8582 VIA GIARDINO**  
**BOCA RATON FL 33433** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D**  
**HO, JONG K**  
**1045 NE 135 ST**  
**NORTH MIAMI FL 33161** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D**  
**NO, JOO H**  
**9185 RAMBLE WOOD APT 612**  
**CORAL SPRINGS FL** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D**  
**KIM, JUNG O**  
**5407 WOODLANDS BLVD**  
**TAMARAC FL 32319** ☒ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D**  
**HWANG, JOHN**  
**4601 FROST HILL BLD.**  
**W. PALM BEACH FL** ☐ Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**D**  
**LEE, JUNG IL**  
**22457 Old Inlet Bridge DR.**  
**BOCA RATON, FL 33433** ☐ Change ☒ Addition

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

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

TITLE : **D**  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  
**LEE, WDO HO**  
**552 N.W. 28 Street**  
**Miami, FL 33127** ☐ Change ☒ Addition

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

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

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-09-01

Date

Daytime Phone #

(561) 289-7282

CR2E037 (10/00)