

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90090 006 ****61.25

DOCUMENT # N99000000400

1. Entity Name
HOLY SPIRIT BAPTIST KOREAN CHURCH, INC.

Principal Place of Business Mailing Address
 6296 N.W. 186TH STREET, #111 6296 N.W. 186TH STREET, #111
 MIAMI FL 33015 MIAMI FL 33015



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
 7701 SW 98th St 21342 S.W. 94th Ct.
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 MIAMI, FL MIAMI, FL

Zip Country Zip Country
 33156 U.S.A. 33189 U.S.A.

4. FEI Number Applied For
 65-0978786 Not Applicable

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

6. Name and Address of Current Registered Agent

SIMS, H. BRYANT ESQ.
7301 S. DIXIE HWY.
WEST PALM BEACH FL 33405

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	PSD RYU, JAE W REV. 6296 N.W. 186TH STREET, #111 MIAMI FL 33015	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD HWANG, JOHN Y REV. 1081-C SUMMIT PL. CIRCLE WEST PALM BEACH FL 33415	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KICHAN, KIM 17200 N.W. 64TH AVENUE, #301 MIAMI FL 33015	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SANG GAP, HAN 3610 YACHT CLUB DR., PH13 AVENTURA FL 33180	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HYEA, JANG 2800 N.E. 147 ST. N. MIAMI FL 33181	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	E AHN, TAEHONG 2905 N.E. 190TH ST., #302 AVENTURA FL 33180	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director of Youth Hyuncheol, Woo 11300 NE 2nd Ave MIAMI Showred FL 33161-6695	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director of Trustees Chungmin, Harvey 6855 SW 166 St MIAMI, FL 33157	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary Hyunju, Ryu 6296 NW 186 St #111 MIAMI, FL 33015	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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

04-17-01 (305) 256-3451
 Date Daytime Phone #

CR2E037 (10/00)