FILED
May 15, 2002 8:00 am
Secretary of State

05-15-2002 90090 040 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000110055

1. Entity Name

Blue Cabin Service, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
7523 Seurat St	7523 Seurat St.
Suite, Apt. #, etc. #306	Suite, Apt. #, etc. #306
City & State Orlando, FL	City & State Orlando, FL
Zip 32819 Country Orange	Zip 32819 Country Orange

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3758397 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Oh, Soo Chul

Street Address (P.O. Box Number is Not Acceptable): 7523 Seurat St. #306

City: Orlando **FL** Zip Code: 32819

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: Soochulok

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) ☐

January 1 - May 1 Fee is $150.00
After May 1, Fee is $550.00
Amended UBR is $61.25
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, D
NAME	Oh, Soo Chul
STREET ADDRESS	7523 Seurat St. #306
CITY-ST-ZIP	Orlando, FL 32819
TITLE	
NAME	
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CITY-ST-ZIP	
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CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Soochulok President, Soo Chul Oh, 4/30/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #