

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)**

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 18 1996 8:00 am
Secretary of State

DOCUMENT # P94000040874 (7)
1. Corporation Name

339 HEALTH STUDIO, INC.



Principal Place of Business: 339 NE 16TH STR. N. MIAMI BEACH FL 33162
Mailing Address: 1226 GOOD HOMES RD. ORLANDO FL 32818

2. Principal Place of Business		2a. Mailing Address		3. Date incorporated or Qualified	3a. Date of Last Report
21	339 NE 167th ST	26	339 NE 167th ST	06/01/1994	08/08/1995
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	Applied For
				59-3251686	Not Applicable
22		27		5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	<input checked="" type="checkbox"/> \$5.00 May Be Added to Fees
N. MIAMI BEACH, FL		N. MIAMI BEACH, FL		8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No
24	33162	25	DADE		
29	33162	30	DADE		

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
KIM, SUN CHA 1226 GOOD HOMES RD. ORLANDO FL 32818				81	Name Yoo Won PARK			
				82	Street Address (P.O. Box Number is Not Acceptable)			
				83	339 NE 167th ST			
				84	City	N. MIAMI BEACH	85	Zip Code
						FL		33162

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: *Yoo Won Park* (Secretary) 7/15/96

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PS	<input type="checkbox"/> DELETE		11 TITLE	SECRETARY	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	KIM, SUN CHA			12 NAME	Yoo Won PARK		
STREET ADDRESS	1226 GOOD HOMES RD.			13 STREET ADDRESS	339 NE 167th ST		
CITY-ST-ZIP	ORLANDO FL 32818			14 CITY-ST-ZIP	N. MIAMI BEACH, FL 33162		
TITLE		<input type="checkbox"/> DELETE		21 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				22 NAME			
STREET ADDRESS				23 STREET ADDRESS			
CITY-ST-ZIP				24 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		31 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				32 NAME			
STREET ADDRESS				33 STREET ADDRESS			
CITY-ST-ZIP				34 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		41 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				42 NAME			
STREET ADDRESS				43 STREET ADDRESS			
CITY-ST-ZIP				44 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		51 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				52 NAME			
STREET ADDRESS				53 STREET ADDRESS			
CITY-ST-ZIP				54 CITY-ST-ZIP			
TITLE		<input type="checkbox"/> DELETE		61 TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME				62 NAME	600001898636		
STREET ADDRESS				63 STREET ADDRESS	-07/18/96--01096--003		
CITY-ST-ZIP				64 CITY-ST-ZIP	***238.75		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Yoo Won Park* (Secretary) 7/15/96 (305) 652-4448

CR2E034 (3/96)