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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

555680

(8)

FILED Feb 16 1996 8:00 am Secretary of State

ACAE	DEMY OF PAK'S KARATE	, INC.							
Principa Place	of Business	Mailing Address				I IADIAE SUSAN DINAI DINIA BINAL II		IIBII BIBII B	(1011 0401) 510 11 188
	NDING BLVD. Mille Fl 32210		1840 BLANDING BLVD. JACKSONVILLE FL 32210						
						3. Date Incorporated or Qualified 12/20/1977	3a. Date	of Last F	•
	ace of Business	2a. Mailing Address			4. FEI Number	<u>- </u>	 	Applied For	
21		26				59-1789118			Not Applicable
Suite, Apt. 4		Suile, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required
City & State		Oty & State				Election Campaign Financing Trust Fund Contribution	Added to Fees		
Ζφ 24	Country	Zip	Count	ry		8. This corporation has liability for i		x under s	199.032,
	25 9. Name and Address of Curr	29 ent Registered Agent	[30]			Florida Statutes Yes 10. Name and Address of New R	□ No	\nan*	
* *			- 8	1 1	Name	IV. ITAIN BIN AUGIESS OF NEW H	ogistered /	Aaug	
SONG KI PAK									
	BLANDING BLVD.		В	2 1	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
	SONVILLE FL 32210-8939		В	3					
			-		~				
			8	4 (City		FI	85 Z	ip Code
12 .	Signatural type of de printed name of registered ap OFFICERS A	NO DIRECTORS	NOTE: Registered Ag		gnature required:	when renstating ADDITIONS/CHANGES TO OFF			
NAME	PAN CONO N	DELFTE	1. 1 TITL				L.	Change	Addition
SESEELADDRESS	PAK, SONG KI 4355 BUCK POINT ROAL	١	1 2 NAM		rouge				
C TY-ST-ZP	JACKSONVILLE, FL 0000		1.3 STRE 1.4 City						
1111	, , , , , , , , , , , , , , , , , , ,	() DELETE	2 1 Tift		EIF			Change	Addition
L.M.		2	2.2 NAMI	É				.,	
STREET ADDRESS			2 3 STRE	ELAD	DRESS				
Oth State			2 4 City	· \$1 - 2	ZIP				
70113		DELETE	3 1 TIFL	E				Change	Addition
NAME:			MAN S E		ĺ				
STREET ACCIDENS			3.3 STRE						
CHY-ST ZW THEE		DELETE	3 4 Cily 4 1 TiTu		ZIP] Change	Addition
NAME			4.2 NAM				L.	T ruisuße	
SIR: FLADDELSS			4.3 STRE		IORESS.				
CITY ST ZIF			4.4 CITY						
TITLE		DELETE	5 1 TITLE					Change	Addition
NAME			5 2 NAMI	ŧ			_		
STELL ADDRESS			53 STRE	ET AD	ORESS				
CITY-SI-ZII			5.4 CHY	- ST - Z	ZIP				
THUE		DELETE	& 1 THTLE	E] Change	☐ Addition
NAME			6.2 NAME						
STREET ADDRESS			63 STRE		i				
CLY S1 ZP	1		6.4 CITY	- ST- 7	71P				

14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Fiorida Statutes. I further certify that the information indicated on this auritual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under outh; that I am an officer or director of the comporation 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:

SNATURE AND THE OF PRINTED TAME OF SIGNING OF INCER ON CHICAGO

2-13-96 954-384-1111