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CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

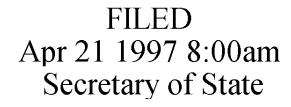
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 642425

(3)

INTERNATIONAL TAE KWON DO CENTER, INC.



Principal Plac	e of Business	Mailing Address	Mailing Address			-		NON CHON END	
13847 8 DIXIE MIAMI FL 3317		13847 S DIXIE HWY MIAMI FL 33176-7221							
		;	;			3. Date Incorporated or Qualified 10/22/1979 3a. Date of Last Report 03/25/1996			
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	1 , 5-4		pplied For
21		26				59-1945288	. /	N	ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc. 27	27			5. Certificate of Status Desired	Xı		Additional equired
City & State	e	City & State	 1			6. Election Campaign Financing / \$5.00 May Be Trust Fund Contribution Added to Fees			
Ζίρ	Country	Zip	Country			This corporation has liability for intangible tax under s. 199.032,			
24	25	25 29 30				Florida Statutes			
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Re-	gistered /	Agent	
CHO	0, \$0 0 SE			81	Name				
138	47 S DIXIE HWY		82			ss (P.O. Box Number is Not Acceptab	ole)		
MIA	MI FL 33176			83		TO THE PARTY OF TH	 	· · · · · · · · · · · · · · · · · · ·	
				84	City			85 Zip	Code
41 Directant to the provisions of Sections 607 0509 and 607 1509 Elocida Statutor							FL		İ
office or r agent. I a	registered agent, or both, in the Sta im familiar with, and accept the obli	te of Florida. Such change was a igations of, Section 607.0505, Fix	authorized orida Stat	d by ules	the corporations.	oration submits this statement for the pon's board of directors. I horeby accept	of the app	ointment as	registered
SIGNATURE	Signature, typed or printed name of registered a	moved and Ob. II mode alide		 1 Acro	ant signature required	d who a circleton	DATE		
12.		ND DIRECTORS	13.	ngo	and and to	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	RS IN 12
TITLE	PD			LF	~~ -	, , , , , , , , , , , , , , , , , , ,		Change	Addition
NAME	CHO, SOO SE		1.2 NA	1.2 NAME				_	
STREET ADDRESS	13847 S DIXIE HWY		1.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 CITY		T-ZIP				
TITLE		DELETE	E 2.1 TITLE					Change	Addition
NAME .		221		2.2 NAME					
STREET ADDRESS		2.3 S		3 STREET ADDRESS					
CITY-ST-ZIP			2. 4 CITY- \$T-7IP		ST - ZIP				
TITLE		☐ DELETE	3.1 TITLE					Change	Addition
NAME			3.2 NAME						İ
STREET ADDRESS			3.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP			3.4. CITY-\$1-7iP		S1-7/P				
TITLE		☐ DELETE						☐ Change	Addition
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET ADDRESS		1				
CITY-ST-ZIP					1 - 7IP				
TITLE		☐ DELETE	5.1 TITLE			·		Change	Addition
	NAME		5.2 NAME						
STREET ADDRESS			5.3 STREET ADDRESS		1				
CITY-ST-ZIP		T DOLLTE	5.4 CHY-SI-ZIP		I - ZIP			T 05	A distance
TITLE		☐ DELETE	61 TITLE					☐ Change	Addition
NAME			6.2 NA						
STREET ADDRESS		P			ADDRESS				
City-St-ZiP	by certify that the information currel	and with this files does not avail	6.4 Cl	IY-\$	1-7IP	in Section 119 07/3/(). Florida Statuto	a. I di uthan	oodily that	

I have been been contained a supplied with this turing does not qualify for the exemption stated in Section 119.07(3)(), 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 607, Florida Statutes and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.