## 2000 UNIFORM BUSINESS REPORT (UBR) FILED Aug 30, 2000 8:00 am Secretary of State DOCUMENT # 729144 1. Entity Name KOREAN PRESBYTERIAN CHURCH OF MIAMI, INC. 03-08-2000 90047 006 \*\*\*\*61.25 08-30-2000 90004 026 \*\*\*\*61.25 Principal Place of Business Mailing Address 13700 N.E. 10TH AVENUE 13700 N.E. 10TH AVENUE NORTH MIAMI FL 33161 NORTH MIAMI FL 33161 00082375 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 59-1697915 Not Applicable Zip \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) WHANG, SANG Y. 8445 SW 148TH DRIVE MIAMI FL FL 33157 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. 8-25-2000 Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State . . . After September 13, 2000 min. will be \$236.25 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. VD Kim chul Ho TITLE TITLE ☐ Delete 10768 Nashville Dr KIM, CHANG YONG NAME NAME STREET ADDRESS 1976 NW 182 AVE STREET ADDRESS Cooper city. FL 33026 CITY-ST-ZIP CITY-ST-ZIP PEMBROKE PINES FL 33029 Lim. Dae 500 14619 Gloncalm Rd Miamilaky Tr33016 ۷D ☐ Delete TITLE TITLE KIM, KANG HONG NAME NAME 9474 NW 54TH ST DORAL CIR LN STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP MIAMI FL 33178 DT Kim. Kang Hong Change ☐ Addition DT TITLE TITLE Delete JOONG, SUN CHOE NAME NAME 9474 N.W. SYTY BOYAL CILLA 9155 RAMBLEWOOD DR SUITE 326 STREET ADDRESS STREET ADDRESS miumi FC33/08 CITY-ST-ZIP CITY-ST-7IP CORAL SPRINGS FL 33071 ☐ Change ☐ Addition Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition ☐ Delete NAME NAME: STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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.

CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPEOFOR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8-25-2000

Daytime Phone #