FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

Apr 30 1998 8:00am **PROFIT** 11 ORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State Socretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** FRONTIER WORLD INVESTMENTS, INC. Principal Place of Business Mailing Address 5215 BISCAYNE AVE. 5215 BISCAYNE AVE. MIAMI FL 33137 MIAMI FL 33137 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 04/12/1988 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 21 65-0043882 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc \$8.75 Additional 6. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Zıp Country Źιρ Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name HYOCHIN, KIM **5215 BISCAYNE BOULEVARD** Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33137** 83 84 City **B5** Zip Code 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 agont. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Redistered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 11 TITLE HYO CHIN, KIM NAME 12 NAME 5215 BISCAYNE BLVD. STREET ADDRESS 13 STREET ADDRESS MIAMI FL CITY-ST-ZIP 14 CITY - ST - ZIP DELETE Addition VSD 21 TITLE TITLE SASIE, KIM NAME 2.2 NAME 5215 BISCAYNE BLVD. STREET ADDRESS 2.3 STREET ADDRESS MIAMI LAKES FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE 3 1 TITLE CHOL CHUNG NAME 3 2 NAME 5215 BISCAYNE BLVD. STREET ADDRESS 3 3 STREET ADDRESS MIAMI FL 3 4. CITY - ST - ZIP CITY-ST-ZIP Addition DELETE Channe TITLE 41 TITLE NAME 4. 2 NAMI 4.9 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 5.1 Tift E NAME 5.2 NAME STHEET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY - ST - ZIP DELETE ☐ Change Addition TITLE 6 1 TITLE NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS

6.4 City - ST - ZiF

CITY ST ZIP

SIGNATURE:

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplied with this filing does not qualify for the exemption stated in Section 1 19.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 1 19.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 1 19.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 1 19.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 1 19.07(3)(ii). Florida Statutes. I further certify that the information indicated in Section 1 19.07(3)(ii). Florida Statutes. I further certificated in Section 1 19.07(3)(ii). Florida Statutes. I further certify that the information indicated in

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