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Mar 25 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # **K37551** **(4)**

1. Corporation Name

MCKINNON AND YI, INC.

Principal Place of Business	Mailing Address
% HYON C. MCKINNON 420 MAGNOLIA ST. ALTAMONTE SPRINGS FL 32701	% HYON C. MCKINNON 420 MAGNOLIA ST. ALTAMONTE SPRINGS FL 32701-2030

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt #, etc 22	Suite, Apt #, etc 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

3. Date Incorporated or Qualified: 10/07/1988

3a. Date of Last Report: 03/27/1996

4. FEI Number: 59-2940618 ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. **Name and Address of Current Registered Agent**

MCKINNON, HYON C
420 MAGNOLIA STREET
ALTAMONTE SPRINGS FL 32701

10. **Name and Address of New Registered Agent**

81 Name: FRANKLIN K. YI
82 Street Address (P.O. Box Number is Not Acceptable): 1020 Ballard Street
83
84 City: Altamonte springs FL 85 Zip Code: 32701

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, am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: [signature] president. (NOTE: Registered Agent signature required when reinstating) DATE: Feb. 13. 1997

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	1.1 TITLE	president	☒ Change ☐ Addition
NAME	MCKINNON, HYON C.		1.2 NAME	FRANKLIN K. YI	
STREET ADDRESS	2124 RIDGE DR.		1.3 STREET ADDRESS	1020 Ballard St,	
CITY-ST-ZIP	WINTER PARK FL		1.4 CITY-ST-ZIP	Altamonte springs, FL, 32701	
TITLE	STD	☐ DELETE	2.1 TITLE	Vice president	☒ Change ☐ Addition
NAME	YI, FRANKLIN K.		2.2 NAME	Young O, Yi	
STREET ADDRESS	4249 CLOVERLEAF PL.		2.3 STREET ADDRESS	1020 Ballard St	
CITY-ST-ZIP	CASSELBERRY FL		2.4 CITY-ST-ZIP	Altamonte Springs, FL 32701	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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

SIGNATURE: [signature] FRANKLIN K. YI 1/21/97 (407) 331-9200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/96)