


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # L80855		
1. Entity Name OH OF PALM BEACH GARDENS, INC.		
Principal Place of Business 12890 TOUCHSTONE PLACE PALM BEACH GARDENS, FL 33418		Mailing Address 12890 TOUCHSTONE PLACE PALM BEACH GARDENS, FL 33418
DO NOT WRITE IN THIS SPACE		
		
03312006 No Chg-P CR2E034 (11/05)		
4. FEI Number 65-0198884		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required
6. Name and Address of Current Registered Agent OH, KYU TAEK 12890 TOUCHSTONE PLACE PALM BEACH GARDENS, FL 33418		DO NOT WRITE IN THIS SPACE
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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
		U00000503680 04/26/06-80042-004 150.00
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OH, KYU TAEK 12890 TOUCHSTONE PLACE PALM BCH GRDNS, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OH, JEUNG JA 12890 TOUCHSTONE PLACE PALM BCH GRDNS, FL	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida 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 607, 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.		
SIGNATURE: <u><i>Kyu Taek Oh</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date: <u><i>April 11 06</i></u> <small>Daytime Phone #</small>