## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS-REPORT (UBR)

## DOCUMENT # M25521

1. Entity Name

**SIGNATURE:** 

YOUNG DISCOUNT CENTER INC.



## FILED Feb 10, 2003 8:00 am Secretary of State

02-10-2003 90158 045 \*\*\*150.00

rincipal Place of Business 173 PARKSIDE CIRCLE NORTH 10CA RATON FL 33486		Mailing Address 1173 PARKSIDE CIRCLE NORTH BOCA RATON FL 33486									
Principal Pla	ce of Business	3. Mailing Address				11881881	il (19 11881 91191 Bist	(1941 HE) GIEN BI	• :: • ( • : • · • · • · • · • · • · • · • · • ·	,, 4	
,	Casa Bella Lane	6318 Casa Bella Lane									
Suite, Apt. #,		Suite, Apt. #, etc.			_		CHECK HEF	E IF MAKING	CHANGES		
ound, rept. in	. 0.07										
City & State		City & State			4.	FEI Numbe	* 59-262149	10		olied For	
Boca I	Raton, FL	Boca RAton, FL								Applicable	
Zip Country		1		Country		Certificate	of Status Desired	ı 🗆	\$8.75 Addi		
33433	Palm Beach	33433	Pa1	m <u>Beac</u>	:h						
33433	6. Name and Address of Current R	legistered Agent			7.	Name and	Address of Nev	Registered	Agent		
				Nama		ОН	, Do	o Hwan	1	-	
OH, DOO H	· ·		Street Address (PO Box Number is Not Acceptable)								
	SIDE CIRCLE NORTH	Shed Address			8- Cas	Casa Bella Lane					
					<del></del>						
BOCA HAT	ON FL 33486					<del></del>			Zin Code		
			•	City	a Rat	οn		FL	Zip Code 3343	3	
	named entity submits this statement for	the receipt of changing it	e rogisters	ed office or I	enistered a	gent, or bo	th, in the State of	Florida. I am	familiar with, a	and accept	
I. The above r	named entity submits this statement for ons of registered agent.	the purpose at changing it	s register		og.0.0.0 = =;	94					
the obligation	ons of registered agent.	A 200	**	OII	D		1/10/0	7.3			
SIGNATURE	1 Dos Gellon		Hwa	n UH,	Presi	dent	1/19/0	DATE		<del></del> ,	
SIGNATORIE A	ignature, typed or printed name of registered agent a	nd title if applicable. (NO	TE: Registere	d Agent signatur	e required when	reinstaurg)					
After	LE NOW!!! FEE IS \$150.00 May 1, 2003 Fee will be \$550.00 Payable to Florida Department of	State					ection Campaign ust Fund Contrib			May Be to Fees	
	OFFICERS AND		11.		A	DDITIONS	/CHANGES TO	OFFICERS AN	D DIRECTORS	3 IN 11	
10.		Delete	TITL		P/S/	7T/D			Change	Addition	
1,1100	PST OH, DOO HWAN	☐ Detete	NAM	1	ØН,	Doo	Hwan				
	1173 PARKSIDE CIRCLE N.			EET ADDRESS			a Bella	Lane			
	BOCA RATON FL		•	r-ST-ZIP			on, FL	33433			
CITY-ST-ZIP			TITL			<u> </u>			☐ Change	Addition	
TITLE	D SUL DOG LEVAN	Delete	NAM	i i							
NAME	OH, DOO HWAN	<b>~</b> ,		EET ADDRESS							
1	1173 PARKSIDE CIRCLE N.			Y-ST-ZIP							
CITY-ST-ZIP	BOCA RATON FL				VP/	<u> </u>		<del></del> -	Change	Addition	
TITLE	VPD	☐ Delete	TITI NA		, ,	-	producer to the second of	المعاري المعارية	$\Delta$		
NAME	SUNG, OH	The second secon		REET ADDRESS			ء <del>الجودية برسونية</del> - 1.1 - م				
STREET ADDRESS	1173 PARKSIDE CIRCLE NORTH			Y-ST-ZIP			a Bella				
CITY-ST-ZIP	BOCA RATON FL 33486				Boc	a Kat	on, FL	_33433	☐ Change	Addition	
TITLE	•	☐ Delete	TIT						Gilainge		
NAME	_		NAI								
STREET ADDRESS			-	REET ADDRESS		w.					
CITY-ST-ZIP			CII	Y-ST-21P 					☐ Change	Addition	
TITLE		☐ Delete	TIT	LE					☐ Change		
NAME				ME							
STREET ADDRESS				REET ADDRESS							
CITY-ST-ZIP	•		CfT	IY-ST-ZIP			<u></u>			My /	
TITLE		☐ Delete	TIT	TLE					Change	Addition	
NAME			NA	ME							
STREET ADDRESS			ST	REET ADDRESS							
CUTY OT 71D				TY-ST-ZIP							
12. I hereby indicated	Certify that the information supplied wit on this report or supplemental report poration or the receiver or trustee emp , or on an attachment with an address,	sowered to execute this rep	ort as red	kemption sta fature shall huired by Cha	ted in Section have the sand apter 607, Fl	on 119.07(3 ne legal eff lorida Statu	3)(i), Florida State ect as if made ur ites; and that my	ites. I further o ider oath; that name appear	certify that the I am an office in Block 10 c	information or director or Block 11 if	

OUDDOG-Hwan Oh, Pres. 1/19/03 (561)498-3015

Daytime Phone #