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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M56047

ALL CORPORATION OF U.S.A.

FILED								
Jun 18	1997	8:00am						
Secre	etary c	of State						

Principal Place of Business Mailing Address							
8198 BAYHILL BLVD. ORLANDO FL 32819	200 S. ORANGE AVE. SUITE 2300 						
	U\$			3. Date Incorporated or Qualified	1	f Last Report	
				07/23/1987	05/01/	1996	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Applied For	
21]	26]			65-0036529		Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$	8.75 Additional Fee Required	
City & State	City & State 28 Orlandon	<u>-</u> L		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zip Cou 24 25	29 32801-3432 30	ountry		8. This corporation has liability for in Florida Statutes	ntangible tax (
9. Name and Address of Current Registered Agent			1	0. Name and Address of New Re-	gistered Ager	nt	
A.G.C. CO.		81	Name				
200 S ORANGE AVE SUITE 2300 ORLANDO FL 32801-3432		82	Street Address	(P.O. Box Number is Not Acceptab	le)		
		83					
		84	City		FL 85	'	
 Pursuant to the provisions of S office or registered agent, or b 	ections 607.0502 and 607.1508, Florida Statutes, the oth, in the State of Florida, Such change was authoric	above zed by	e-named corporation's	tion submits this statement for the pr s board of directors. I hereby accep	urpose of char t the appointn	nging its registered nent as registered	

agent. I a	m familiar with, and accept the obligations of, Section	n 607.0505, Floric	da Statutes.	oration's board of directors, a nereby accept tr	e appointment as	registered
SIGNATURE	Signature, typod or printed name of registered agent and title if anoticet	Alott fo	logistered Agent signature			
12.	OFFICERS AND DIRECTORS	ne (NOTE H	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTOR	S IN 12
TITLE	DC	DELETE	1.1 TITLE	,	☐ Change	Addition
NAME	YANG, NANG G		1.2 NAME			
STREET ADDRESS	9198 BAYHILL BLVD	•	1.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32819		1.4 CITY - ST - 7IP			
TITLE	DPD	☐ DEL€TE	2.1 TITLE	, , , , , , , , , , , , , , , , , , , ,	Change	Addition
NAME	KIM, MIHO		2.2 NAME			
STREET ADDRESS	9198 BAYHILL BLVD		2.3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32819		2 4 CITY-ST-ZIP			
TITLE	DTS	DELETE	3 1 HTLE		Change	Addition
NAME	KIM, MIKI		3 2 NAME			ŀ
STREET ADDRESS	9198 BAYHILL BLVD.		3 3 STREET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32819		3 4. CITY - ST - 7IP			
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		DELFTE	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		j	6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

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.