FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (8)M62383 C M G TRADING CO., INC.

FILED Feb 17 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							 		
777 N.W. 72 SUITE 2 BE MIAMI FL 3	3.7	SUITE 2 BI	777 N.W. 72 AVE. Suite 2 BB 7 Miami Fl 33126			DO NOT WRITE	E IN THIS SPACE		
						3. Date Incorporated or Qualified 11/12/1987			
2. Principal P	lace of Business	2a. Mailing Ad	ddress			4. FEI Number		Applied For	
21		26				65-0012808		Not Applicable	
Suite, Apt.	#, etc.	27				5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & Stat	9	City & Sta	City & State			Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution	☐ Add	ed to Fees	
Zip	Country	<i>Ζι</i> ρ	<u> </u>	Country	<i>!</i>	8. This corporation owes or has pa	\—/ ·		
24	25	29	30	J		Personal Property Tax due June 10. Name and Address of New Re		L] No	
	g, Name and Address of C	nueur vadiarereo wae	IR .	81	Name	10. Name and Address of New Ne	Bistelan VAcia		
CHUNG, MIN GOO				L.	I Vaine				
	77 N.W. 72 AVE. UITE 2 BB 7				82 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33126				83					
,,,	HTM 1 C 00 1 C 0			84	City		B5 Z	Zip Code	
					1			· .]	
office or r	to the provisions of Sections 60 egistered agont, or both, in the m familiar with, and accept the	State of Florida, Such of	hande was auth	iorized bi	v the corporal	poration submits this statement for the patients board of directors. I hereby acce	ourpose of changin pt the appointment	g its registered as registered	
SIGNATURE	,								
SIGNATORE	Signature: typed or printed name of registe	red agent and tille it applicable	(NOH · Re	gistered Ag	ent signature requi	red whore reinstating)	DATE		
12.		S AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	D	L	DELETE	1.1 TITLE			[_] Chang	ge ∐ Addition	
NAME	CHUNG, MIN GOO			1.2 NAME					
STREET ADDRESS	6975 SW 107 ST			1.3 STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL		Copy etc	1.4 CITY-5	S1-ZIP		11000		
TITLE		Ļ	DELETÉ	2.1 TITLE			[_] Chang	ge 🔲 Addition	
NAME				2.2 NAME					
STREET ADDRESS				2.3 STREET					
CITY-ST-ZIP			DELETE	2. 4 CITY	ST-ZIP		Chang	ge Addition	
TITLE		L	CLLCIL	3.1 TITLE				- E. Poditroll	
NAME STREET ADDRESS				3.2 NAME 3.3 STREET	ADDRESS				
-				3.4. CITY-					
City-ST-ZIP TITLE			DELETE	4.1 TITLE	21-10		Chang	ge Addition	
NAME				4. 2 NAME					
STREET ADDRESS				4.3 STREET	ADDRESS				
CITY-ST-ZIP				4.4 CITY - 9					
TITLE			DELETE	5.1 TITLE			Chang	ge Addition	
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREET	ADDRESS				
CITY-ST-ZIP				5.4 CITY - 9	ST - ZIP				
TITLE			DELETE	6.1 TITLE			Chang	ge Addition	
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET	ADDRESS				
				بيسما					

14. I 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 truefee 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.

(305)261-1182